

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000035154

Entity Name: KEKE'S, INC.**Current Principal Place of Business:**203 E MAIN ST
SPARTANBURG, SC 29319**Current Mailing Address:**203 E MAIN ST
SPARTANBURG, SC 29319 US**FEI Number:** 88-2316768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title DIRECTOR
Name DUNN, STEPHEN C
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title DIRECTOR
Name VEROSTEK, ROBERT P
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title TREASURER
Name NICHOLS, CURTIS L. JR.
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title ASST. SECRETARY
Name TAYLOR, JASMINE E
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title DIRECTOR
Name MYERS, GAIL SHARPS
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title PRESIDENT
Name SCHMIDT, DAVID
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title SECRETARY
Name MYERS, GAIL SHARPS
Address 203 EAST MAIN STREET
City-State-Zip: SPARTANBURG SC 29319

Title VP, TRAINING AND HR
Name MILLER, ANNALISE
Address 203 E MAIN ST
City-State-Zip: SPARTANBURG SC 29319

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER A SMITH

ASST SECRETARY

04/29/2024

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP, OPERATIONS
Name RODRIGUEZ, MANUEL
Address 203 E MAIN ST
City-State-Zip: SPARTANBURG SC 29319

Title ASST. SECRETARY
Name SCHOMISCH, NICKOLAS
Address 203 E MAIN ST
City-State-Zip: SPARTANBURG SC 29319-0001

Title ASSISTANT SECRETARY
Name SMITH, CHRISTOPHER A
Address 203 E MAIN ST
City-State-Zip: SPARTANBURG SC 29319