



**State of Rhode Island  
Office of the Secretary of State**

No Fee

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

**This form is only to be used to amend the current annual report on file with this office.**

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 000059535

**2. Name of Corporation** KELEN, INC.

**3. Street Address Principal Business Office:**

No. and Street: 112 PT. JUDITH RD  
City or Town: NARRAGANSETT State: RI Zip: 02882 Country: USA

**4. Business Phone No.**

**5. State of Incorporation**

State: RI

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

713990

**6. Brief Description of the Character of Business Conducted in Rhode Island**

TO OWN AND OPERATE SEASONAL AMUSEMENT FACILITY

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PATRICIA KELLS	90 S. CATALINA COURT VERO BEACH, FL 32963 USA
TREASURER	JOSH NOYES BURDICK	1720 EAST ROSEWOOD COURT VERO BEACH, FL 32966 UNI

VICE PRESIDENT	MELISSA RAE KELLS BURDICK	1720 EAST ROSEWOOD COURT VERO BEACH, FL 32966 USA
SECRETARY	PATRICIA KELLS	90 SOUTH CATALINA COURT VERO BEACH, FL 32963 USA

**8. Shares Authorized and Issued**

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	600.00	600

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 15 Day of July, 2021 at 3:46:18 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By PATRICIA KELLS  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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State of Rhode Island  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,  
hereby certify that this document, duly executed in accordance with the provisions  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this  
office on this day:

July 15, 2021 03:45 PM

A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

