

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 21, 2004  
Secretary of State**

DOCUMENT# 729339

Entity Name: KEY WEST SAILING CLUB, INC.

**Current Principal Place of Business:**

703 PALM AVE  
P.O.BOX 828  
KEY WEST, FL 33041 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 828  
KEY WEST, FL 33041828 US

**New Mailing Address:**

FEI Number: 59-2813351      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CURRAN, NANCY  
912 WHITE STREET  
KEY WEST, FL 33040 US

**Name and Address of New Registered Agent:**

CURRAN, NANCY  
PO BOX 761  
KEY WEST, FL 33041 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: NANCY CURRAN

01/21/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: THIESEN, THOMAS  
Address: 1919 VENETIA STREET  
City-St-Zip: KEY WEST, FL 33040

Title: VD ( ) Delete  
Name: ADAMS, TIMOTHY  
Address: 1911 VENETIA STREET  
City-St-Zip: KEY WEST, FL 33040

Title: TD ( ) Delete  
Name: CURRAN, NANCY  
Address: 65 LAKE STREET  
City-St-Zip: COTAIT, MA 26350

Title: SD ( ) Delete  
Name: KARA, ART  
Address: 7 HANTS LANE  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: CURRAN, NANCY  
Address: PO BOX 761  
City-St-Zip: KEY WEST, FL 33041

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY CURRAN

TD

01/21/2004

Electronic Signature of Signing Officer or Director

Date