## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#729339**

FILED Mar 03, 2011 Secretary of State

Date

Entity Name: KEY WEST COMMUNITY SAILING CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

705 PALM AVE

KEY WEST, FL 33040 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 828

KEY WEST, FL 330410828 US

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

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

MCVEIGH, ROGER 627 SIMONTON ST KEY WEST, FL 330406896 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.

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

SIGNATURE:

NIELSEN, JENS Name: Address: 921 CENTER ST City-St-Zip: KEY WEST, FL 33040

Title: **VPD** 

Name: FOSTER, DAVID Address: PO BOX 6560

City-St-Zip: KEY WEST, FL 330416560

Title: TD

MARY-LYNN, SCHULTZ Name: Address: 617 FLEMING ST #6 City-St-Zip: KEY WEST, FL 33040

Title:

Name: **EDWARD GULLY** Address: PO BOX 2414 City-St-Zip: KEY WEST, FL 33045

Title:

WHITE, JOHN Name: 1226 SEMINARY ST Address: KEY WEST, FL 33040 City-St-Zip:

Title:

CALLIOUT, JEEP Name: Address: PO BOX 521

KEY WEST, FL 330410521 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**PRES** SIGNATURE: JENS M NIELSEN 03/03/2011