

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 26, 2012  
Secretary of State**

DOCUMENT# 729339

**Entity Name:** KEY WEST COMMUNITY SAILING CENTER, INC.**Current Principal Place of Business:**705 PALM AVE  
KEY WEST, FL 33040 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 828  
KEY WEST, FL 330410828 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:**MCVEIGH, ROGER  
627 SIMONTON ST  
KEY WEST, FL 330406896 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**Title: PD  
Name: NIELSEN, JENS  
Address: 921 CENTER ST  
City-St-Zip: KEY WEST, FL 33040Title: VPD  
Name: JEFF, MINALGA  
Address: PO BOX 6560  
City-St-Zip: KEY WEST, FL 330416560Title: TD  
Name: THIMOTHY, VALLILEE  
Address: 2601 SOUTH ROSEVELT BLVD APT 114C  
City-St-Zip: KEY WEST, FL 33040Title: D  
Name: GULLY, EDWARD  
Address: PO BOX 2414  
City-St-Zip: KEY WEST, FL 33045Title: D  
Name: ALEXANDER, JOHN  
Address: 1226 SEMINARY ST  
City-St-Zip: KEY WEST, FL 33040Title: D  
Name: CALLIOUT, JEEP  
Address: PO BOX 521  
City-St-Zip: KEY WEST, FL 330410521

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.

SIGNATURE: JENS M NIELSEN

PD

06/26/2012

Electronic Signature of Signing Officer or Director

Date