

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 12, 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:**705 PALM AVE
KEY WEST, FL 330407031 US**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: MINAGA, JEFFREY A
Address: 1200 4TH ST # 136
City-St-Zip: KEY WEST, FL 330403763 USTitle: TD
Name: GRIFFIN, MONIQUE
Address: 1341 MCCARTHY LN # 103
City-St-Zip: KEY WEST, FL 33040 USTitle: PA
Name: MCADAMS, GARY
Address: 4139 EAGLE AVE
City-St-Zip: KEY WEST, FL 33040 USTitle: 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: JEFFREY A MINALGA

PD

11/12/2012

Electronic Signature of Signing Officer or Director_____
Date