

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000341

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: SALTPONDS CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

3635 SEASIDE DRIVE  
103  
KEY WEST, FL 33040

## New Principal Place of Business:

## Current Mailing Address:

3635 SEASIDE DRIVE  
103  
KEY WEST, FL 33040

## New Mailing Address:

FEI Number: 65-1003806      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALLACE, R. BRUCE  
608 WHITEHEAD STREET  
KEY WEST, FL 33040      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 ( ) Delete  
Name: WEINHOFFER, MIKE  
Address: 22885 CALICO JACK CIRCLE  
City-St-Zip: CUDJOE KEY, FL 33042

Title: VPD ( ) Delete  
Name: RICHARDSON, DAVID  
Address: 3635 SEASIDE DR., #208  
City-St-Zip: KEY WEST, FL 33040

Title: SD ( ) Delete  
Name: BRAMLAGE, MAUREEN  
Address: 3635 SEASIDE DRIVE., UNIT 103  
City-St-Zip: KEY WEST, FL 33040

Title: TD ( ) Delete  
Name: CREIGHTON, JOHN  
Address: 3635 SEASIDE DRIVE, UNIT 103  
City-St-Zip: KEY WEST, FL 333040

Title: D ( ) Delete  
Name: HASGELIN, DIANA  
Address: 3635 SEASIDE DR., #202  
City-St-Zip: KEY WEST, FL 33040

Title: MGR ( ) Delete  
Name: LOCKARD, RON  
Address: 135 CUTLASS LANE  
City-St-Zip: CUDJOE KEY, FL 33042

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CORUSO, ROBERT  
Address: 3635 SEASIDE DR. #127  
City-St-Zip: KEY WEST, FL 33040

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

Title: SD (X) Change ( ) Addition  
Name: THOMPSON, MELVIN  
Address: 3635 SEASIDE DRIVE., UNIT 103  
City-St-Zip: KEY WEST, FL 33040

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

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

Title: MGR (X) Change ( ) Addition  
Name: HOLTkamp, ROGER  
Address: 28 KEY HAVEN ROAD  
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROGER HOLTkamp

MGR

04/24/2007

Electronic Signature of Signing Officer or Director

Date