

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715394

**Entity Name:** THE SANDS OF KEY BISCAYNE ASSOCIATION, INC.**Current Principal Place of Business:**605 OCEAN DR  
KEY BISCAYNE, FL 33149**Current Mailing Address:**605 OCEAN DR  
MANAGEMENT OFFICE  
KEY BISCAYNE, FL 33149**FEI Number:** 59-1269433**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KW PROPERTY MANAGEMENT  
8200 NW 33RD ST.  
STE. 300  
DORAL, FL 33122 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:** RYAN SATOW

02/18/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name KURLANCHEEK, JUD  
Address 166 HARBOR DRIVE  
APT 4  
City-State-Zip: KEY BISCAYNE FL 33149

Title PRESIDENT  
Name SCHRAGER, SAMUEL L  
Address 607 OCEAN DRIVE, 11J  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name BERGER, DANIEL  
Address 607 OCEAN DR, 5K  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name LOPEZ, JOSE G  
Address 607 OCEAN DR  
UNIT 8J  
City-State-Zip: KEY BISCAYNE FL 33149

Title SECRETARY  
Name POTTS, RENEE  
Address 613 OCEAN DRIVE, 2D  
City-State-Zip: KEY BISCAYNE FL 33149

Title TREASURER  
Name BERNSTEIN-BATISTA, SYLVIA  
Address 613 OCEAN DR, 11C  
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR  
Name DIAZ-BALART, CRISTINA  
Address 611 OCEAN DRIVE  
7F  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** SAMUEL SCHRAGER

PRESIDENT

02/18/2020

Electronic Signature of Signing Officer/Director Detail

Date