

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715394

FILED
Mar 31, 2014
Secretary of State
CC4475157502

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:

SKRLD, INC.
201 ALHAMBRA CIRCLE, 11TH FLOOR
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ARMSTRONG, DWIGHT
Address 611 OCEAN DRIVE, 9E
City-State-Zip: KEY BISCAYNE FL 33149

Title VP
Name BOHUTINSKY, ANDREW
Address 613 OCEAN DRIVE, 10C
City-State-Zip: KEY BISCAYNE FL 33149

Title SECRETARY
Name DE BLAS, JULIO
Address 605 OCEAN DRIVE, 4M
City-State-Zip: KEY BISCAYNE FL 33149

Title DIRECTOR
Name KIMEN, GAIL
Address 611 OCEAN DR, 5E
City-State-Zip: KEY BISCAYNE FL 33149

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

Title DIRECTOR
Name PENICHET, JOSE
Address 605 OCEAN DR, 4L
City-State-Zip: KEY BISCAYNE FL 33149

Title PRESIDENT
Name POTTS, RAPHAEL
Address 613 OCEAN DRIVE, 2D
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: JOSE LOPEZ

TREASURER

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date