

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729339

**Entity Name:** KEY WEST COMMUNITY SAILING CENTER, INC.

**Current Principal Place of Business:**

705 PALM AVE  
KEY WEST, FL 33040-7031

**Current Mailing Address:**

PO BOX 828  
KEY WEST, FL 33041-0828 US

**FEI Number:** 59-2813351

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCVEIGH, ROGER  
627 SIMONTON ST  
KEY WEST, FL 33040-6896 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 PD  
Name MINALGA, JEFFREY A  
Address 1200 4TH ST # 136  
City-State-Zip: KEY WEST FL 33040-3763

Title TD  
Name GRIFFIN, MONIQUE  
Address 1341 MCCARTHY LN # 103  
City-State-Zip: KEY WEST FL 33040

Title PA  
Name MCADAMS, GARY  
Address 4139 EAGLE AVE  
City-State-Zip: KEY WEST FL 33040

Title D  
Name LINDSEY, TIM  
Address 1121 GEORGE ST  
City-State-Zip: KEY WEST FL 33040

Title D  
Name ALEXANDER, JOHN  
Address 1226 SEMINARY ST  
City-State-Zip: KEY WEST FL 33040

Title D  
Name EDSON, JILL  
Address 3702 PAULA AVE  
City-State-Zip: KEY WEST FL 33040

*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

**PRESIDENT**

**05/01/2013**

Electronic Signature of Signing Officer/Director Detail

Date