2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 729339

Entity Name: KEY WEST COMMUNITY SAILING CENTER, INC.

FILED
May 05, 2016
Secretary of State
CC3949237332

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:

ROSE, MARCI L 810 THOMAS STREET 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	PRESIDENT	Title	TREASURER
Name	ROHRSCHNEIDER, JANE G	Name	VICKERS, RUSS T
Address	PO BOX 828	Address	38 GOLF CLUB DRIVE
City-State-Zip:	KEY WEST FL 33041-0828	City-State-Zip:	KEY WEST FL 33040

Title DIRECTOR Title SECRETARY

NameBENDER, BERTNameMANCHESTER, SANDRAAddress410 ANGELA STREETAddress209 EAST MACEDONIA RDCity-State-Zip:KEY WEST FL 33040City-State-Zip:TOWANDA PA 18848

 Title
 DIRECTOR
 Title
 FLEET OFFICER

 Name
 EDSON, JILL
 Name
 ANDERSON, PAGE B

Address 3702 PAULA AVE Address 306 JULIA ST

City-State-Zip: KEY WEST FL 33040 City-State-Zip: KEY WEST FL 33040

TitleDIRECTORTitleVICE COMMODORENameMATTHEWS, WALTERNameARCHER, BILLAddress705 PALM AVEAddress705 PALM AVE

City-State-Zip: KEY WEST FL 33040 City-State-Zip: KEY WEST FL 33040-7031

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: RUSS VICKERS TREASURER 05/05/2016