

2017 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:

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
Name ROHRSCHEIDER, JANE G
Address PO BOX 828
City-State-Zip: KEY WEST FL 33041-0828

Title TREASURER
Name VICKERS, RUSS T
Address 38 GOLF CLUB DRIVE
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name BENDER, BERT
Address 410 ANGELA STREET
City-State-Zip: KEY WEST FL 33040

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

Title VICE COMMODORE
Name ARCHER, BILL
Address 705 PALM AVE
City-State-Zip: KEY WEST FL 33040-7031

Title DIRECTOR
Name JOHNSON, HUGH
Address 2404 STAPLE 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: RUSS VICKERS

TREASURER

01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date