

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000341

Entity Name: SALTPONDS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3635 SEASIDE DRIVE
103
KEY WEST, FL 33040**Current Mailing Address:**3635 SEASIDE DRIVE
103
KEY WEST, FL 33040**FEI Number:** 65-1003806**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE LA CAMARA, ROSA MESQ
121 ALHAMBRA PLAZA, 10TH 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	TREASURER
Name	MEIGGS, ROBERT MICHAEL
Address	3655 SEASIDE DRIVE # 225
City-State-Zip:	KEY WEST FL 33040

Title	VP
Name	WHARTON, SIDNEY
Address	3655 SEASIDE DRIVE # 220
City-State-Zip:	KEY WEST FL 33040

Title	MGR
Name	HOLTKAMP, ROGER
Address	28 KEY HAVEN ROAD
City-State-Zip:	KEY WEST FL 33040

Title	AT LARGE
Name	SAWYER, JEFF
Address	3635 SEASIDE DRIVE # 211
City-State-Zip:	KEY WEST FL 33040

Title	SECRETARY
Name	GRATTAN, MICHAEL
Address	3655 SEASIDE DRIVE # 123
City-State-Zip:	KEY WEST FL 33040

Title	PRESIDENT
Name	SHILLING, SAMUEL
Address	3675 SEASIDE DRIVE # 140
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: ROGER HOLTKAMP**MANAGER****01/02/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date