## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000000341

Entity Name: SALTPONDS CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 11, 2018 **Secretary of State** CC5685098790

# **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:

# 225

**TREASURER** Title Title **SECRETARY** WHARTON, SIDNEY MEIGGS. ROBERT MICHAEL Name Name

Address 3655 SEASIDE DRIVE Address 3655 SEASIDE DRIVE

# 220

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

Title MGR Title AT LARGE

ASHE, REBEKAH Name HOLTKAMP, ROGER Name

28 KEY HAVEN ROAD 3655 SEASIDE DRIVE Address Address

# 130

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

Title **PRESIDENT** 

Title AT LARGE MURRELL, ROBERT Name

SHILLING, SAMUEL Name Address 3635 SEASIDE DRIVE

3675 SEASIDE DRIVE # 105

# 140 KEY WEST FL 33040

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

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.

Address

01/11/2018 SIGNATURE: ROGER HOLTKAMP MANAGER