

2021 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 MGR
Name HOLTkamp, ROGER
Address 28 KEY HAVEN ROAD
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 VP
Name WHARTON, SIDNEY
Address 3655 SEASIDE DRIVE
 # 220
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 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: SAMUEL J, SHILLING**PRESIDENT****04/30/2021**

Electronic Signature of Signing Officer/Director Detail

Date