

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003428

**Entity Name:** SHADY PALMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

76777 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036

**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC3036292550**

**Current Mailing Address:**

1223 WHITE STREET  
UNIT 104  
KEY WEST, FL 33040 US

**FEI Number:** 20-4702946

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SANCHEZ, JENNIFER  
1223 WHITE STREET  
UNIT 104  
KEY WEST, FL 33040 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 PD  
Name SANCHEZ, RALPH  
Address 1223 WHITE STREET  
UNIT 105  
City-State-Zip: KEY WEST FL 33040

Title VSD  
Name MISCH, PAUL  
Address 1223 WHITE STREET  
UNIT 105  
City-State-Zip: KEY WEST FL 33040

Title TD  
Name DORSEY, MICHAEL  
Address 1223 WHITE STREET  
UNIT 105  
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:** RALPH SANCHEZ

**PRESIDENT**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date