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.

PD

#### SIGNATURE: LORETTA DI TOCCO

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: LORETTA DI TOCCO

Officer/Director Detail :				
Title	SD	Title	TD	
Name	PEARCE, ROBIN	Name	THEES, GERALD	
Address	1110 FLEMING STREET UNIT 1	Address	1110 FLEMING STREET UNIT 4	
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040	
Title	PD	Title	VP	
Name	DI TOCCO, LORETTA	Name	KINNE, NANCE	
Address	1110 FLEMING STREET, UNIT 4	Address	1110 FLEMING STREET	
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	UNIT 2 KEY WEST FL 33040	

# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N0700004504

# Entity Name: 1110 FLEMING STREET CONDOMINIUM ASSOCIATION, INC.

# **Current Principal Place of Business:**

1110 FLEMING STREET UNIT 4 KEY WEST, FL 33040

### **Current Mailing Address:**

**1110 FLEMING STREET** UNIT 4 KEY WERST, FL 33040 US

### FEI Number: 30-0491923

# Name and Address of Current Registered Agent:

DI TOCCO, LORETTA 1110 FLEMING STREET UNIT 4 KEY WEST, FL 33040 US

Electronic Signature of Registered Agent

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.

Certificate of Status Desired: No

FILED Jan 12, 2017 Secretary of State CC3193215180

01/12/2017

Date