

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006922

Entity Name: DANCE KEY WEST, INC**Current Principal Place of Business:**512 EATON STREET
2ND FLOOR
KEY WEST, FL 33040**Current Mailing Address:**P.O. BOX 501
KEY WEST, FL 33041 US**FEI Number:** 26-3272935**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PISCOPINK, KYLA M
7 AMARYLLIS DRIVE
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:** KYLA PISCOPINK

02/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	PISCOPINK, KYLA
Address	7 AMARYLLIS DRIVE
City-State-Zip:	KEY WEST FL 33040

Title	PRESIDENT
Name	KAPLE, STEPHANIE
Address	P.O. BOX 501
City-State-Zip:	KEY WEST FL 33041

Title	DIRECTOR
Name	LETO, PENNY
Address	P.O. BOX 501
City-State-Zip:	KEY WEST FL 33041

Title	DIRECTOR
Name	STOVER SICKMEN, ERIN
Address	P.O. BOX 501
City-State-Zip:	KEY WEST FL 33041

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: KYLA PISCOPINK

DIRECTOR

02/10/2019

Electronic Signature of Signing Officer/Director Detail

Date