

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N39477

**FILED**  
**Feb 16, 2017**  
**Secretary of State**  
**CC0205776256**

**Entity Name:** SHIPYARD CONDOMINIUM ASSOCIATION, INC,

**Current Principal Place of Business:**

305 WHITEHEAD STREET  
KEY WEST, FL 33040

**Current Mailing Address:**

305 WHITEHEAD STREET  
KEY WEST, FL 33040 US

**FEI Number:** 65-0343807

**Certificate of Status Desired:** No

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

CHRISTIAN, STERLING J  
305 WHITEHEAD STREET  
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 VP  
Name AGNEW, JACK  
Address 137 WARWICK RD., WEST  
City-State-Zip: NEWTON MA 02456

Title PRESIDENT  
Name CARON, MIKE  
Address 620 THOMAS ST, #172  
City-State-Zip: KEY WEST FL 33040

Title TREASURER  
Name JOHNSON, DAN  
Address P.O. BOX 1602  
City-State-Zip: WAUSAU WI 54402

Title SECRETARY  
Name COX, BILL  
Address 625 RIDGEWOOD ROAD  
City-State-Zip: BEL AIR MD 21014

Title DIRECTOR  
Name DEHNING, BILL  
Address 2300 WEST CALHOUN PKWY, #202  
City-State-Zip: MINNEAPOLIS MN 55416

*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:** MIKE CARON

**PRESIDENT**

**02/16/2017**

Electronic Signature of Signing Officer/Director Detail

Date