

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002607

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** TREMONT II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

STERLING MANAGEMENT  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

THE CONTINENTAL GROUP, INC.  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**Current Mailing Address:**

STERLING MANAGEMENT  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**New Mailing Address:**

THE CONTINENTAL GROUP, INC.  
1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**FEI Number:** 59-3557603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WETHERINGTON, HAMILTON, HARRISON & FAIR PA  
1010 N FLORIDA AVE  
TAMPA, FL 33602 US

**Name and Address of New 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MONNETTE, PAUL  
Address: 629 TREMONT GREENS LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VPD  
Name: KRAUSE, GEORGE  
Address: 655 TREMONT GREENS LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SD  
Name: WERTMAN, RICHARD  
Address: 723 TREMONT GREENS LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TD  
Name: BARNES, MARVIN  
Address: 615 TREMONT GREENS LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D  
Name: JOHNSON, LEE  
Address: 661 TREMONT GREENS LANE  
City-St-Zip: SUN CITY CENTER, FL 33573

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: BRIAN L. MAY

MGR

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date