## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 718013** 

Entity Name: POINTE TOWERS CONDOMINIUM, INC.

**Current Principal Place of Business:** 

555 GULF WAY

ST. PETE BEACH, FL 33706

**Current Mailing Address:** 

C/O LAMONT MANAGEMENT 250 104TH AVENUE TREASURE ISLAND. FL 33706 US

FEI Number: 59-1834597 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

LAMONT MANAGEMENT 250 104TH AVENUE TREASURE ISLAND, FL 33706 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: STEPHANIE HENDRIX 01/29/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

PRESIDENT, / TREASURER Title Title S

Name SCHEFSTAD, THERESA Name OBER, SUSAN

Address C/O LAMONT MANAGEMENT Address C/O LAMONT MANAGEMENT

250 104TH AVENUE 250 104TH AVENUE

City-State-Zip: City-State-Zip: TREASURE ISLAND FL 33706 TREASURE ISLAND FL 33706

Title VΡ Title **BOARD MEMBER** LIPPONEN. CHERYL L

Name Name MALANOS, JAMES

C/O LAMONT MANAGEMENT Address C/O LAMONT MANAGEMENT Address

250 104TH AVENUE 250 104TH AVENUE

City-State-Zip: TREASURE ISLAND FL 33706 City-State-Zip: TREASURE ISLAND FL 33706

Title **BOARD MEMBER** Name MOORE, BRAD

Address C/O LAMONT MANAGEMENT

250 104TH AVENUE

City-State-Zip: TREASURE ISLAND FL 33706

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: THERESA SCHEFSTAD

**PRESIDENT** 

01/29/2016

**FILED** Jan 29, 2016

**Secretary of State** 

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