

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743761

Entity Name: POINTE CAPRI ADULT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

184 117TH AVE
TREASURE ISLAND, FL 33706

Current Mailing Address:

C/O LAMONT MANAGEMENT, INC.
250 104TH AVE
TREASURE ISLAND, FL 33706 US

FEI Number: 59-1840145

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMONT MANAGEMENT
250 104TH AVE
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

01/08/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name OTTANI, ELIZABETH
Address C/O LAMONT MANAGEMENT, INC.
250 104TH AVE
City-State-Zip: TREASURE ISLAND FL 33706

Title TREASURER
Name MCDONALD, ALLEN
Address C/O LAMONT MANAGEMENT, INC.
250 104TH AVENUE
City-State-Zip: TREASURE ISLAND FL 33706

Title VP
Name MCENEANEY, JOHN
Address C/O LAMONT MANAGEMENT, INC.
250 104TH AVE
City-State-Zip: TREASURE ISLAND FL 33706

Title DIRECTOR
Name KUMMER, TRISH
Address C/O LAMONT MANAGEMENT, INC.
250 104TH AVE
City-State-Zip: TREASURE ISLAND FL 33706

Title SECRETARY
Name KHAN, MAHJABEEN
Address C/O LAMONT MANAGEMENT, INC.
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: ELIZABETH OTTANI

PRESIDENT

01/08/2018

Electronic Signature of Signing Officer/Director Detail

Date