

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000012792

**FILED**  
**Mar 22, 2024**  
**Secretary of State**  
**2606569726CC**

**Entity Name:** HERITAGE BAY UMBRELLA ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
CLEARWATER, FL 33762

**Current Mailing Address:**

C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
CLEARWATER, FL 33762 US

**FEI Number:** 20-5772540

**Certificate of Status Desired:** No

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

PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
CLEARWATER, FL 33762 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:** PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 03/22/2024  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title	PRESIDENT	Title	VP
Name	SEVERANCE , LAURA	Name	ELLISON, LAURA
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260	Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762	City-State-Zip:	CLEARWATER FL 33762
Title	VP	Title	SECRETARY
Name	MURRAY, RICHARD	Name	SCHLATTER, PAUL
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260	Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip:	CLEARWATER FL 33762	City-State-Zip:	CLEARWATER FL 33762
Title	TREASURER		
Name	STEWART, GRANT		
Address	C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT 3001 EXECUTIVE DRIVE SUITE 260		
City-State-Zip:	CLEARWATER FL 33762		

*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:** SEVERANCE , LAURA PRESIDENT 03/22/2024  
Electronic Signature of Signing Officer/Director Detail Date