

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07960

Entity Name: CAPRI HARBOR SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**LAMONT MANAGEMENT
250 104TH AVENUE
TREASURE ISLAND, FL 33706**Current Mailing Address:**LAMONT MANAGEMENT
250 104TH AVENUE
TREASURE ISLAND, FL 33706 US**FEI Number:** 59-2877340**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAMONT MANAGEMENT
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

03/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	SMITH, DOUG
Address	LAMONT MANAGEMENT 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706

Title	PRESIDENT
Name	PHELPS, JIM
Address	LAMONT MANAGEMENT 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706

Title	VP
Name	GAUSS, CHRISTINE
Address	LAMONT MANAGEMENT 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706

Title	DIRECTOR
Name	KIEFFER, JON
Address	LAMONT MANAGEMENT 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706

Title	SECRETARY
Name	BILLINGTON, ARTHUR
Address	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: JIM PHELPS

PRESIDENT

03/24/2023

Electronic Signature of Signing Officer/Director Detail

Date