

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

DOCUMENT# N33556

**Entity Name:** MONTCLAIR AT AUDUBON CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 08, 2024**  
**Secretary of State**  
**6810173976CC**

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number: 65-0140748**

**Certificate of Status Desired: No**

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

MURRELL, ROBERT  
MURRELL LAW FIRM  
5415 JAEGER ROAD, SUITE B  
NAPLES, FL 34109 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: ROBERT MURRELL**

**04/08/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ARROWSMITH, THOMAS  
Address C/O PRECEDENT HOSPITALITY  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title PRESIDENT  
Name VECCHIONE, MICHAEL  
Address C/O PRECEDENT HOSPITALITY  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title TREASURER  
Name SHERMAN, MARY LOU  
Address C/O PRECEDENT HOSPITALITY  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title SECRETARY  
Name GRECKY, JOSEPH  
Address C/O PRECEDENT HOSPITALITY  
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: VECCHIONE , MICHAEL**

**PRESIDENT**

**04/08/2024**

Electronic Signature of Signing Officer/Director Detail

Date