## 2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N33556

Entity Name: MONTCLAIR AT AUDUBON CONDOMINIUM ASSOCIATION, INC.

FILED
Jul 29, 2021
Secretary of State
5845518262CC

## **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:

PRECEDENT HOSPITALITY C/O PRECEDENT HOSPITALITY 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: WENDY MURRAY 07/29/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DT Title DS

Name ARROWSMITH, THOMAS Name GURSAHANEY, ARJAN

Address C/O PRECEDENT HOSPITALITY Address C/O PRECEDENT HOSPITALITY

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title VP, D Title DP

Name SHERMAN, MARY LOU Name VECCHIONE, MICHAEL

Address C/O PRECEDENT HOSPITALITY Address C/O PRECEDENT HOSPITALITY

3001 EXECUTIVE DRIVE SUITE 260 3001 EXECUTIVE DRIVE SUITE 260

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR, VP Name BROWN, DAVID

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.