

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

DOCUMENT# 733472

Entity Name: SCHOONER BAY CONDOMINIUM ASSOCIATION OF NORTH
FORT MYERS, 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: 59-1732607

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOEDE, DEBOEST & CROSS, PLLC
GOEDE, DEBOEST & CROSS, PLLC
2030 MCGREGOR BLVD
FORT MYERS, FL 33901 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: GOEDE, DEBOEST & CROSS, PLLC

02/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name CONLON, MICHAEL
Address C/O PRECEDENT HOSPITALITY &
PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title SECRETARY
Name DUBE, GARY
Address C/O PRECEDENT HOSPITALITY &
PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name BIELAWA, RICHARD
Address C/O PRECEDENT HOSPITALITY
& PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name RAYMER, JOHN
Address 3001 EXECUTIVE DRIVE, SUITE 260
260
City-State-Zip: CLEARWATER FL 33762

Title PRESIDENT
Name MILLER, MAUREEN
Address C/O PRECEDENT HOSPITALITY &
PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title VP
Name DEPOSITAR, TODD
Address C/O PRECEDENT HOSPITALITY &
PROPERTY MANAGEMENT
3001 EXECUTIVE DRIVE SUITE 260
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR
Name BEBEE-BURKE, SUZIE
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: MAUREEN MILLER

PRESIDENT

02/28/2024

