2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2017
Secretary of State
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Entity Name: TREASURE ISLAND POINTS WEST APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12000 CAPRI CIR S
TREASURE ISLAND, FL 33706

Current Mailing Address:

C/O LAMONT MANAGEMENT, INC.
250 104TH AVENUE
TREASURE ISLAND, FL 33706 US

FEI Number: 59-2335470

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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 01/11/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	BOARD MEMBER	Title	PRESIDENT
Name	BROOKS, MATTHEW	Name	ANDERSON, DONNA
Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE	Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706	City-State-Zip:	TREASURE ISLAND FL 33706
Title	SECRETARY	Title	VP, TREASURER
Name	FERRARA, JUDY	Name	MORRILL, CONNIE
Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE	Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706	City-State-Zip:	TREASURE ISLAND FL 33706
Title	DIRECTOR		
Name	CARVER, KEITH		
Address	C/O LAMONT MANAGEMENT, INC. 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: DONNA ANDERSON PRESIDENT 01/11/2017

Electronic Signature of Signing Officer/Director Detail — Date