## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 753890** 

Entity Name: ISLAND INN CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 11, 2017
Secretary of State
CC6439886229

## **Current Principal Place of Business:**

9980 GULF BOULEVARD TREASURE ISLAND. FL 33706

## **Current Mailing Address:**

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

FEI Number: 59-2130015 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LAMONT MANAGEMENT C/O LAMONT MANAGEMENT, INC. 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 P Title VP

Name SMITH, MICHAEL F Name BROWNLEE, CARL

Address C/O LAMONT MANAGEMENT, INC. Address C/O LAMONT MANAGEMENT, INC.

250 104TH AVENUE 250 104TH AVENUE

TREASURE ISLAND FL 33706 City-State-Zip: TREASURE ISLAND FL 33706

Title T Title DIRECTOR

Name MANINGS, JOEL Name BUBACK, KENNETH

Address C/O LAMONT MANAGEMENT, INC. Address C/O LAMONT MANAGEMENT, INC.

250 104TH AVENUE 250 104TH AVENUE

City-State-Zip: TREASURE ISLAND FL 33706 City-State-Zip: TREASURE ISLAND FL 33706

Title BOARD

City-State-Zip:

Name MORRIS, GREGORY

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: MICHAEL SMITH PRESIDENT 01/11/2017