2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762897

Entity Name: CAPRI HARBOR, PHASE I, INC.

Current Principal Place of Business:

C/O LAMONT MANAGEMENT, INC.

250 104TH AVENUE

TREASURE ISLAND, FL 33706

Current Mailing Address:

C/O LAMONT MANAGEMENT, INC.

250 104TH AVENUE

TREASURE ISLAND, FL 33706 US

FEI Number: 59-2284441 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMONT MANAGEMENT 250 104 AVE

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 01/07/2018

Electronic Signature of Registered Agent

Date

FILED Jan 07, 2018

Secretary of State

CC9036191220

Officer/Director Detail:

City-State-Zip:

Title Title DIRECTOR

GORDON, ROBERT Name Name MARATOS, STANLEY

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

250 104TH AVENUE 250 104TH AVENUE

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

Title Title **TREASURER**

GREENE, LAUREN MAY, JONATHON Name Name

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

> 250 104TH AVENUE 250 104TH AVENUE

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

Title **BOARD MEMBER** Title **BOARD MEMBER** Name TAGGART, KAREN Name STACK, JOHN

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

250 104TH AVENUE 250 104TH AVENUE

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

Title **SECRETARY**

Name CASTELLANO, ELIO

C/O LAMONT MANAGEMENT, INC. Address

250 104TH AVENUE

TREASURE ISLAND FL 33706 City-State-Zip:

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.

01/07/2018 SIGNATURE: ROBERT GORDON PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date