

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739497

**Entity Name:** THE OAK DOORS, INC., A CONDOMINIUM

**Current Principal Place of Business:**

301 87TH AVENUE  
ST PETE BEACH, FL 33706

**Current Mailing Address:**

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

**FEI Number:** 59-2262963

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LAMONT MANAGEMENT  
C/O 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

01/22/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            LUKAVICIUS, JONAS  
Address        C/O LAMONT MANAGEMENT, INC.  
                  250 104TH AVENUE  
City-State-Zip: TREASURE ISLAND FL 33706

Title            SECRETARY  
Name            HENRY, SHARI  
Address        C/O LAMONT MANAGEMENT, INC.  
                  250 104TH AVENUE  
City-State-Zip: TREASURE ISLAND FL 33706

Title            VP  
Name            BURTON, MONICA  
Address        C/O LAMONT MANAGEMENT, INC.  
                  250 104TH AVENUE  
City-State-Zip: TREASURE ISLAND FL 33706

Title            PRESIDENT  
Name            PARNELL, CHRISTOPHER  
Address        C/O LAMONT MANAGEMENT, INC.  
                  250 104TH AVENUE  
City-State-Zip: TREASURE ISLAND FL 33706

Title            BOARD  
Name            JADLOWSKI, JAMES  
Address        C/O LAMONT MANAGEMENT  
                  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:** CHRISTOPHER PARNELL

PRESIDENT

01/22/2020

Electronic Signature of Signing Officer/Director Detail

Date