PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT 1. Corporation Name	#	61	93	1	3

FEATHER SOUND COUNTRY CLUB, INC.

Principal Place of Business

Mailing Address

2201 FEATHER SOUND DRIVE CLEARWATER FL 34622

2201 FEATHER SOUND DRIVE CLEARWATER FL 34622

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90116 047 ***150.00



CLEARWATER FL 34622 CLEARWATER FL 34		34622		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 05/01/1979			
2. Principal Place of Business	2a. Mailing Addre	SS		4. FEI Number	. Applied For		
<u> </u>	26			59-2028155	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #,	etc.		5, Certifcate of Status Desired	\$8.75 Additional Fee Required		
2	27						
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip C	ountry Zip	Country	<i>i</i>	8. This corporation owes the current year	Intangible		
4 25	29	30		Personal Property Tax.	☐ Yes ☐ No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
HEISTAND, PAUL- A 221 2ND AVENUE N	•	81 82		ss (P.O. Box Number is Not Acceptable)			
ST. PETERSBURG F		83					

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE				-	DATE	
	Signature, typed or printed name of registered agent and t		egistered Agent signature r			DC IN 12
12.	OFFICERS AND DI		13.	ADDITIONS/CHANGES TO		
TITLE	PD	☐ DELETE	1.1 TITLE		Change	☐ Addition
NAME	KINSEL, JOHN		1.2 NAME		_	
STREET ADDRESS	2901 SAND PIPER PL		1.3 STREET ADDRESS		7	
CITY-ST-ZIP	CLEARWATER FL 33762		1.4 CITY-ST-ZIP			V
πιε	VD ·	KI DELETE	2.1 TITLE	SD · (/k)	Change	Addition
NAME	HARRIS, JOHN L		2.2 NAME	RICE, JACK	Dellice	}
STREET ADDRESS	2841 LA CONCHA DR		2.3 STREET ADORESS	14261 LARK COURT	• -	
CITY-ST-ZIP	CLEARWATER FL 33762		2.4 CITY-ST-ZIP	CLEARWATER, FL 3	3762	
TITLE	SD	☐ DELETE	3.1 TITLE	TD	X Change	☐ Addition
NAME	KENNEDY, FRANK		3.2 NAME			
STREET ADDRESS	14521 TEAL CT		3.3 STREET ADDRESS			ì
CITY-ST-ZIP	CLEARWATER FL 33762		3.4. CITY-ST-ZIP			
TITLE	TD	☐ DELETE	4.1 TITLE	VD	X Change	☐ Addition
NAME	Huber, Robert		4. 2 NAME			
STREET ADDRESS	5940 BALI WAY S.		4.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETE BEACH FL 33706		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		. Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS	w. Lindied (1986)		6.3 STREET ADDRESS			•
CMY-ST-ZIP	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual port is the and accurate and that my 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 fructed empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/99 (727) 573 - 5666
Daytime Phone #

CR2E034 (1:1/98)