

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 619313

1. Entity Name

FEATHER SOUND COUNTRY CLUB, INC.

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90091 036 \*\*\*150.00

Principal Place of Business

Mailing Address

2201 FEATHER SOUND DRIVE  
CLEARWATER FL 34622

2201 FEATHER SOUND DRIVE  
CLEARWATER FL 33762-3312

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2028155**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

HEISTAND, PAUL- ALLISON  
221 2ND AVENUE NORTH  
ST. PETERSBURG FL 33701

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete  
NAME **KINSEL, JOHN**  
STREET ADDRESS **2901 SAND PIPER PL**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **TD** ☐ Delete  
NAME **KENNEDY, FRANK**  
STREET ADDRESS **14521 TEAL CT**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **VD** ☐ Delete  
NAME **HUBER, ROBERT**  
STREET ADDRESS **5940 BALI WAY S.**  
CITY-ST-ZIP **ST. PETE BEACH FL 33706**

TITLE **SD** ☐ Delete  
NAME **RICE, JACK**  
STREET ADDRESS **14261 LARK CT**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SD** ☐ Change ☒ Addition  
NAME **PURVIS, ALBERT**  
STREET ADDRESS **14238 LARK COURT**  
CITY-ST-ZIP **CLEARWATER, FL 33762**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **PD** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VD** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental report is true 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 1999