

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763243

FILED
Feb 29, 2012
Secretary of State

Entity Name: FEATHER POINTE ASSOCIATION, INC.

Current Principal Place of Business:

C/O COMMUNITY MANAGEMENT CONCEPTS, INC
4585 140TH AVE N, SUITE 1012
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

C/O COMMUNITY MANAGEMENT CONCEPTS, INC
4585 140TH AVE N, SUITE 1012
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-2189257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC
4585 140TH AVE N,
SUITE 1012
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CHALWICK, SANDRA
Address: 4585 140TH AVE N, SUITE 1012
City-St-Zip: CLEARWATER, FL 33762

Title: T
Name: BURKE, TOM
Address: 4585 140TH AVE N, SUITE 1012
City-St-Zip: CLEARWATER, FL 33762

Title: S
Name: SANTIAGO, NYDIA
Address: 4585 140TH AVE N, SUITE 1012
City-St-Zip: CLEARWATER, FL 33762

Title: D
Name: BRANTA, BILL
Address: 3001 EXECUTIVE DR, SUITE 260
City-St-Zip: CLEARWATER, FL 33762

Title: D
Name: MARSLAT, ASHLEY ELLIS
Address: 3001 EXECUTIVE DR, SUITE 260
City-St-Zip: CLEARWATER, FL 33762

Title: D
Name: JENKINS, MICHAEL
Address: 3001 EXECUTIVE DR, SUITE 260
City-St-Zip: CLEARWATER, FL 33762

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: SANDRA CHEVOLA CHALWICK

PD

02/29/2012

Electronic Signature of Signing Officer or Director

_____ Date