2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2007 8:00 am Secretary of State 04-23-2007 90062 030 ****61.25 DOCUMENT # N96000004441 EAGLES WALK AT FEATHER SOUND HOMEOWNERS ASSOCIATION, INC. 40014524 Principal Place of Business Mailing Address 13641 EAGLES WALK DRIVE 3001 EXECUTIVE DRIVE CLEARWATER, FL 33762 SUITE 260 CLEARWATER, FL 33762 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162007 Cha-NP CR2E037 (12/06) City & State City & State Applied For 4. FEI Numbe 59-3400627 Nor Applicable Country Zip Country \$8.75 Additional 5 Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CONDOMINIUM ASSOC. 3001 EXECUTIVE DRIVE SUITE 260 Street Address (P.O. Box Number is Not Acceptable) CLEARWATER, FL 33762 City 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. Lam familiar with and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DA" 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE æ6∵ () ☐ Delete TITLE William Haldeman 13628 Eagles Walk HUNTINGTON, SUSAN NAME NAME STREET ADDRESS 13747 EAGLES WALK DR. STREET ADDRESS Clearwater, FL. 33762 CLEARWATER, FL 33762 CITY-ST-7IP CITY-ST-7/P THEF TITLE - Oelete DIETZ, ROSEMARY NAME DANIEL HUBBARD 13670 EAGLES WALK DRIVE STREET ADDRESS STREET ADDRESS 13LO4 EAGLES WALK DR. CITY-ST-ZIP CLEARWATER, FL 33762 CITY-ST-ZIP CLEARWATER, FL. 33767 20 D Delete TITLE ☐ Changa Addition LYONS, TERRY NAME NAME STREET ADDRESS 13698 EAGLES WALK DR. STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33762 CITY-ST-ZIP

CIW. Fl. 33762 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true-field accurate and that my signature shall have the same legal effect as if made under oath that if an an office or direction 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 in Block this report as required by Chapter 617, Florida Statutes, and that my name appears in Block this report.

CITY - ST - ZIP

THIE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-71P

CITY-ST-ZIP

CITY-ST-ZIP

QUESADA, SUSAN

2118 FEATHERSAND DR.

CLEARWATER, FL 33762

13650 EAGLES WALK DR

CLEARWATER, FL 33762

SINCLAIR, CAROLYN

Sound Dr.

☐ Delete

☐ Delete

☐ Delete

Change

☐ Change

Addition

Addition

Addition

FILED