DOCUMENT# 762746 Entity Name: FEATHER EDGE CONDOMINIUM ASSOCIATION, INC.				May 17, 2023 Secretary of State	
Current Prin	cipal Place of Business:	CIATION, INC.	101288753		
Current Mai	ling Address:				
1000 PINE H ALTAMONT	IOLLOW PT E SPRINGS, FL 32714 US				
FEI Number: 59-2452019 Cert			Certificate of Status Desired	I: No	
Name and A	ddress of Current Registered Agent:				
1000 PINE HOL	NAGEMENT COMPANY LOW PT PRINGS, FL 32714 US				
The above name	l entity submits this statement for the purpose of changing its i	registered office or regis	tered agent, or both, in the State of Florida.		
SIGNATURE	BRETT M JORDAN				
			05	5/17/2023	
	Electronic Signature of Registered Agent			5/17/2023 Date	
Officer/Dire			05		
Officer/Dire		Title	О5		
	ctor Detail :	Title Name			
Title	ctor Detail : PRESIDENT		т		
Title Name Address	ctor Detail : PRESIDENT SMITH, PAULA	Name Address	T ENGELS, JOHN		
Title Name Address	ctor Detail : PRESIDENT SMITH, PAULA 1000 PINE HOLLOW PT	Name Address	T ENGELS, JOHN 1000 PINE HOLLOW PT		
Title Name Address City-State-Zip:	ctor Detail : PRESIDENT SMITH, PAULA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714	Name Address	T ENGELS, JOHN 1000 PINE HOLLOW PT		
Title Name Address City-State-Zip: Title	Ctor Detail : PRESIDENT SMITH, PAULA 1000 PINE HOLLOW PT ALTAMONTE SPRINGS FL 32714 VP	Name Address	T ENGELS, JOHN 1000 PINE HOLLOW PT		

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: PAULA SMITH

PRESIDENT

05/17/2023

FILED

Electronic Signature of Signing Officer/Director Detail