

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

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90024 027 \*\*\*\*61.25

DOCUMENT # 738263  
 1. Entity Name  
 FEATHER SOUND-TOWNHOUSE PHASE I  
 HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business      Mailing Address  
 13894 LAKEPOINT DRIVE      13894 LAKEPOINT DRIVE  
 CLEARWATER, FL 33762      CLEARWATER, FL 33762

00010124



01022007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-1804163	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BROWN, BETSY  
 13922 LAKE POINT DRIVE  
 CLEARWATER, FL 33762

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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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE Betsy Brown Treasurer      DATE Jan 24 2007

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BROWN, BETSY 13922 LAKEPOINT DRIVE CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>AS</del> ALDERSON, ANNETTE 14072 LAKE POINT DR CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>WD</del> HOLTON, TIM 14055 LAKE POINT DRIVE CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>S</del> <sup>P</sup> LONG, CHARLENE <del>13995 LAKE POINT DRIVE</del> CLEARWATER, FL 33762 Kenty Kerstin 13979 Lake Point Dr Clearwater FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>D</del> <sup>D</sup> SMITH, DARYN <del>13896 LAKEPOINT DRIVE</del> CLEARWATER, FL 33762 Jost Joe 14011 Lake Point Dr Clearwater FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>RVP</del> ETMAN, DOUG 1399 LAKEPOINT DRIVE CLEARWATER, FL 33762

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12. I hereby 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other lists empowered.  
 SIGNATURE: [Signature]      Date Feb 12, 2007      Daytime Phone # 727 572 447