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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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151 MOORE CR2E037 (10/06)

DOCUMENT # 752208 1. Entity Name FAIRWAY VILLAS AT FEATHER SOUND ASSOCIATION, INC				FILED 07 MAR 22 AM 2:26 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2400 LAKE PT LANE CLEARWATER FL 33762 US		Mailing Address 2400 LAKE PT LANE CLEARWATER FL 33762 US			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2359440 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAIDENBERG, LEE 2457 LAKE POINT LA CLEARWATER FL 33762				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and fee is applicable. (NOTE: Registered Agent's signature required when converting) DATE _____					
FILE NOW: FEE IS \$81.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MAIDENBERG, LEE 2457 LAKE POINT LA CLEARWATER FL 33762	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Charles Connors (at large) ☐ Change ☒ Addition 2419 Lake Point LA V.P. Clearwater, FL 33762	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SEWELL, JOYCE 2421 LAKE POINT LA CLEARWATER FL 33762	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	David Rachus (at large) ☐ Change ☒ Addition 2415 Lake Point LA Clearwater, FL 33762	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CLEMMONS, DIANE 2417 LAKE POINT LA CLEARWATER FL 33762	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CLEMMONS, DIANE 2417 LAKE POINT LANE CLEARWATER FL 33762	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.					
SIGNATURE: <u>Joyce S. Sewell</u> <u>Joyce S. Sewell</u> <u>2/9/07</u> <u>727-561-7622</u> SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR Daytime Phone #					