2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763243

FILED Apr 08, 2011 Secretary of State

Entity Name: FEATHER POINTE ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR, SUITE 260 CLEARWATER, FL 33762

C/O COMMUNITY MANAGEMENT CONCEPTS, INC 4585 140TH AVE N, SUITE 1012

CLEARWATER, FL 33762

Current Mailing Address:

New Mailing Address:

C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR, SUITE 260 CLEARWATER, FL 33762

C/O COMMUNITY MANAGEMENT CONCEPTS, INC. 4585 140TH AVE N, SUITE 1012

CLEARWATER, FL 33762

FEI Number: 59-2189257

FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LANG & BROWN PA 5001 FOURTH STREET NORTH SUITE A ST. PETERSBURG, FL 33734 US COMMUNITY MANAGEMENT CONCEPTS, INC 4585 140TH AVE N,

SUITE 1012

CLEARWATER, FL 33762 US

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: KIRK BLISS

04/08/2011 Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Name:

CHALWICK, SANDRA

4585 140TH AVE N, SUITE 1012 Address: City-St-Zip: CLEARWATER, FL 33762

Title:

Name: BURKE, TOM

Address: 4585 140TH AVE N. SUITE 1012 City-St-Zip: CLEARWATER, FL 33762

Title:

FAIRDEY, GWEN Name:

4585 140TH AVE N, SUITE 1012 Address: City-St-Zip: CLEARWATER, FL 33762

Title:

Name: BRANTA, BILL

3001 EXECUTIVE DR, SUITE 260 Address: City-St-Zip: CLEARWATER, FL 33762

Title:

THOMPSON, KEVIN Name:

3001 EXECUTIVE DR, SUITE 260 Address: City-St-Zip: CLEARWATER, FL 33762

Title:

JENKINS, MICHAEL Name:

Address: 3001 EXECUTIVE DR, SUITE 260 CLEARWATER, FL 33762 City-St-Zip:

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 CHALWICK

PD

04/08/2011