2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 20, 2005 8:00 am Secretary of State **DOCUMENT # 765798** 1. Entity Name 04-20-2005 90346 046 ****61.25 FEATHER SOUND CUSTOM HOME SITE UNIT JII, . . . HOMEOWNERS' ASSOCIATION, INC. Mailing Address Principal Place of Business ひひひせひひんり 2101 FIFTH AVENUE NORTH P.O. BOX 360 ST. PETERSBURG FL 33731 ST. PETERSBURG FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) Applied For City & State 4. FEI Number City & State NO-T APPLICABLE Not Applicable Country Zip Country Zip \$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 Name TUCKER, JOHN V ESQ Street Address (P.O. Box Number is Not Acceptable) 2101 FIFTH AVENUE NORTH ST PETERSBURG FL 33713 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Due By May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition TUCKER, JOHN NAME NAME 2965 SANDPIPER PLACE STREET ADDRESS STREET ADDRESS CLEARWATER FL 33762 CITY-\$1-ZIP CITY-ST-ZIP ☐ Delete Addition BARNUM, MAUREEN NAME NAME 2882 SANDPIPER PLACE STREET ADDRESS STREET ADDRESS CLEARWATER FL 33762 CITY-ST-7IP CITY-ST-7/P X Delete ☐ Addition TITLE THE TUCKER, DEBORAH NAME NAME MICHAEL NOVACK 2965 SANDPIPER PLACE STREET ADDRESS STREET ADDRESS 2998 TEAL LANE **CLEARWATER FL 33762** CITY-ST-ZIP CITY-ST-ZIP CLEARWATER, FL. 33762 ☐ Delete TITLE ☐ Change ☐ Addition AMEEN, EDWARD NAME NAME 2811 SANDPIPER PLACE STREET ADDRESS STREET ADDRESS CLEARWATER FL CITY-ST-7IP CITY-ST-7IP ☐X Delete T Change TITLE TITLE ☐ Addition BASTAS, CHRIS NAME MICHAEL WILLIAMS NAME 2934 TEAL LANE STREET ADDRESS STREET ADDRESS 14529 FEATHERSOUND DRIVE **CLEARWATER FL 33762** CiTY - ST - ZIP CITY-ST-ZIP CLEARWATER, FL 33762 Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 ap address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: 4

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SIGNATURE AND TYPED OR PRINTED NA

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