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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000003931 (0)

CMHC OF FEATHER SOUND, INC.

FILED Apr 16 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address 90 MARCHED EVECUTIVE CENTED | | | | | | - rooting the verte state states states where we say | | |
|--|--|--|------------------------|--------------------|--|--|-----------------------------------|-----------------------|
| 301 WHEELER EXECUTIVE CENTER 301 WHEELER EXECUTIVE AUGUSTA GA 30909 AUGUSTA GA 30909 | | | | | | | | |
| | | | | | | DO NOT WRITE IN TH 3. Date Incorporated or Qualified | IIS SPACE | |
| <u> </u> | | | | | | 08/01/1996 | | |
| 2. Principal Place of Business 2a. Mailing Address 945 Broad Street 945 Broad S | | | | | | 4. FEI Number | | Applied For |
| 21] 20 | | | treet | reet | | 63-1175533 | | Not Applicable |
| Suite, Apt #, etc Suite, Apt. #, etc. 22 Suite 220 Suite 220 Suite 220 | | | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | | | | | | 6. Election Campaign Financing | \$5.0 | 00 May Be |
| | 23 Augusta, Georgia 28 Augusta, | | | | | Trust Fund Contribution | | ed to Fees |
| Zip | F | | η | 1 1 | | 8. This corporation owes or has paid the current year Intangible | | |
| 24 30901 | 26 USA 9. Name and Address of Cui | [29] 3()9()] | 30 US | A | | Personal Property Tax due June 30. 10. Name and Address of New Register | Yes | ∐ No |
| <u> </u> | CORPORATION SYSTEM | Tell Hegistered Agent | | 1 Name | ı | 10. Harrie and Address of New Register | ou Agent | |
| | DO SOUTH PINE ISLAND ROA | n | Ĺ | | | W | | |
| PLANTATION FL 33324 | | | 8: | 2 Street | Addres | dress (P.O. Box Number is Not Acceptable) | | |
| , ,, | MIXION 12 33324 | | 8 | 3 | | | | |
| | | | | 1 | | | | |
| | | | 8 | 4 City | | F | EL 85 Z | ip Code |
| 11. Pursuant | to the provisions of Sections 607. | 0502 and 607.1508, Florida Statute | es, the abo | ve-namec | corpoi | ation submits this statement for the purpose of source of directors. I hereby accept the | | g its registered |
| office or r | egistered agent, or both, in the Si im familiar with, and accept the ob | tate of Florida. Such change was a oligations of, Section 607,0505, Flo | uthorized b | by the cor | poratio | n's board of directors. I hereby accept the a | appointment | as registered |
| SIGNATURE | | , , , , , , , , , , , , , , , , , , , | nod Oldidi | 30. | | | | |
| SIGNATURE | Signature, typed or printed name of registered | agent and tille if applicable (NOTE | Registered A | gent signatur | e required | when reinstating) DAT | E | |
| 12. | | AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | AND DIRECT | ORS IN 12 |
| TITLE | PCD | XX DELETE | 1.1 TITLE | | PD | | XX Chang | je 🔲 Addition |
| NAME | MCD CLARK, HARRY | ALIABANIA AFIRED | 1.2 NAME | | | fe, Gary | | |
| STREET ADDRESS | 106 PLANTATION POINTE | SHUPPING CENTER | | T ADDRESS | 602 | 5 Oakwood Lane | | |
| CITY-ST-ZIP | FAIRHOPE AL VD | K DELETE | 1.4 CITY- | | Fai: | rhope, AL 36532 | 1 1 20 | F-1-1 1 111 |
| TITLE NAME | CLARK, DEBORAH J | | | 2.1 TITLE ST | | trell, David | Chang | je XX Addition |
| | 106 PLANTATION POINTE | SHOODING CENTED | 2.2 NAME | | 24 | Ashley Drive | | |
| STREET ADDRESS | FAIRHOPE AL | ONOFFRIO CEITIEN | | T ADDRESS | | ile, AL 36608 | | |
| CITY-ST-ZIP TITLE | STD | K DELETE | 2. 4 CITY 3.1 TITLE | | 1.00 | 11e, AB 30000 | Chang | e Addition |
| NAME | NELSON, WALLACE D | | 3.2 NAME | | | | L. J Onally | ∾ ⊑ Addition |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | ļ |
| CITY-ST-ZIP | FAIRHOPE AL | | | 3.4 CITY-ST-ZIP | | | | |
| TITLE | | | 4.1 TITLE | | | | Chang | e Addition |
| NAME | WOLFE OARY | | | 4. 2 NAME | | | | |
| STREET ADDRESS | 151 SOUTH BAYVIEW | | 4.3 STREE | 4.3 STREET ADDRESS | | 70.00 | | |
| CITY-S1-ZIP | FAIRHOPE AL | | 4.4 CITY | ST-ZIP | | , | | |
| TITLE | | ☐ DELETE | 5 1 TITLE | | 1 | | ☐ Chang | e Addition |
| NAME | | | 5 2 NAME | | | | | |
| STREET ADDRESS | | | 53 STAE | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY- | ST-ZIP | | | | |
| TITLE | | DELETE | 61 TITLE | | | | Chang | e 🔲 Addition |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CITY- | ST-ZIP | L | | | |

r nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.