

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 22, 2000 8:00 am**  
**Secretary of State**

02-22-2000 90014 015 \*\*\*150.00

**DOCUMENT # G91715**

1. Entity Name

**FEATHERROCK MOBILE HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

STATE ROAD 60 EAST  
P.O. BOX 1035  
FL 33594-0703

2406 STATE ROAD 60 EAST  
P.O. BOX 1035  
VALRICO FL 33594-3707

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2410620**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, R. CHRIS**  
**2128 GREYMONT DRIVE**  
**VALRICO FL 33594**

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.

SIGNATURE

*R. Chris Smith*

*2/16/00*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	FERGOSON, GERALD J.	
STREET ADDRESS	2206 RIDGECREST DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	ZINK, WILLIAM	
STREET ADDRESS	2222 MIRAMONT CIR	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	KLCO, ROSIE	
STREET ADDRESS	129 DANNY DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SHIFFLET, ROY	
STREET ADDRESS	402 GARDENWOOD PLACE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FROST, HELEN	
STREET ADDRESS	114 SUSAN PLACE	
CITY-ST-ZIP	VALRICO FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SMITH, R. CHRIS	
STREET ADDRESS	2128 GREYMONT DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rosie Klco Drive	
STREET ADDRESS	129 Danny Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shirley hockwood	
STREET ADDRESS	113 Danny Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James Gorman	
STREET ADDRESS	2107 Village Hill Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*R. Chris Smith*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*2/16/00*

Daytime Phone #

*661-7191*

CR2E034 (9/99)