

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009189

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: FEATHER EDGE II CONDOMINIUM ASSOCIATION INC.

## Current Principal Place of Business:

C/O LELAND MANAGEMENT  
8009 S ORANGE AVE  
ORLANDO, FL 32809

## New Principal Place of Business:

882 JACKSON AVE  
WINTER PARK, FL 32789

## Current Mailing Address:

C/O LELAND MANAGEMENT  
8009 S ORANGE AVE  
ORLANDO, FL 32809

## New Mailing Address:

882 JACKSON AVE  
WINTER PARK, FL 32789

FEI Number: 20-0030785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LELAND MANAGEMENT INC.  
1633 E. VINE STREET, SUITE 110  
KISSIMMEE, FL 34744 US

## Name and Address of New Registered Agent:

SPECIALTY MANAGEMENT  
882 JACKSON AVE  
WINTER PARK, FL 32789 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: MARC P DAVIS

04/29/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SABETI, MANSOUR M  
Address: 128 EAST COLONIAL DRIVE  
City-St-Zip: ORLANDO, FL 32801

Title: SD ( ) Delete  
Name: SABETI, LANA  
Address: 128 EAST COLONIAL DRIVE  
City-St-Zip: ORLANDO, FL 32801

Title: TD ( ) Delete  
Name: DELACRUZ, MELISSA  
Address: 128 EAST COLONIAL DRIVE  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STANECK, MERYEM  
Address: 105 LAKE EMMA COVE DRIVE  
City-St-Zip: LAKE MARY, FL 32746

Title: VD (X) Change ( ) Addition  
Name: BAKER, JAY  
Address: 123 LAKE EMMA COVE DRIVE  
City-St-Zip: LAKE MARY, FL 32746

Title: STD (X) Change ( ) Addition  
Name: CAREY, MARGARET  
Address: 151 FEATHERS EDGE LOOP  
City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MERYEM STANEK

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date