2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009189

FILED Mar 31, 2009 Secretary of State

Entity Name: FEATHER EDGE II CONDOMINIUM ASSOCIATION INC.

New Principal Place of Business: Current Principal Place of Business: 882 JACKSON AVE WINTER PARK, FL 32789 **Current Mailing Address: 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: Name and Address of New Registered Agent: SPECIALTY MANAGEMENT HIRSCHFELD, DAWNE 882 JACKSON AVE 882 JACKSON AVE WINTER PARK, FL 32789 WINTER PARK, FL 32789 US 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: DAWNE HIRSCHFELD 03/31/2009 Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

City-St-Zip:

() Delete

LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

STANECK, MERYEM STANECK, MERYEM Name: Name: 105 LAKE EMMA COVE DRIVE Address: 337 SPRUCEWOOD ROAD Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 Title: VD () Delete Title: (X) Change () Addition BAKER, JAY Name: ALTAN, ENGIN Name: Address: 123 LAKE EMMA COVE DRIVE Address: 1652 CHERRY RIDGE DRIVE City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 Title: () Delete Title: () Change () Addition HILTON, HARRY Name: Name: 101 LAKE EMMA COVE DRIVE Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: (X) Change () Addition Title: () Delete Title: SD Name: BRENDER, GARY Name: BRENDER, GARY 113 LAKE EMMA COVE DR Address: Address: 113 LAKE EMMA COVE DR City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 Title: () Delete Title: () Change () Addition KASMAN, JUSTIN Name: Name: 105 FEATHER EDGE LOOP Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: MERYEM STANEK PD 03/31/2009