2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005118

FILED Mar 03, 2009 Secretary of State

Entity Name: FEATHERBROOK AT COLONIAL III RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044

FEI Number: 20-1578916 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:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 PD (X) Change () Addition

 Name:
 SCHNEIDER, CRAIG
 Name:
 SCHNEIDER, CRAIG

 Address:
 9032 PROSPERITY WAY
 Address:
 9032 PROSPERITY WAY

 City-St-Zip:
 FORT MYERS, FL 33913
 City-St-Zip:
 FORT MYERS, FL 33913

Title: DST () Delete Title: TSD (X) Change () Addition Name: HART, THOMAS Name: HART, THOMAS

Address: 9033 PROSPERITY WAY Address: 9033 PROSPERITY WAY
City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

Title: DV () Delete Title: VPD (X) Change () Addition

 Name:
 BOWDEN, JOHN
 Name:
 BOWDEN, JOHN

 Address:
 9029 PROSPERITY WAY
 Address:
 9029 PROSPERITY WAY

 City-St-Zip:
 FORT MYERS, FL 33913
 City-St-Zip:
 FORT MYERS, FL 33913

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.

SIGNATURE: CRAIG SCHNEIDER PD 03/03/2009