## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

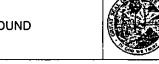
## **FILED** Apr 16, 2007 8:00 am Secretary of State

04-16-2007 90055 006 \*\*\*\*61.25

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## DOCUMENT # N94000005209

THE EAGLES CROSSING AT FEATHER SOUND HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE, #260 CLEARWATER, FL 33762  2. Principal Place of Business - No P.O. Box #			Mailing Address CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE, #260 CLEARWATER, FL 33762 US										
Suite, Apt. #, etc.		Suite, Apt. #, etc.					03052007 Chg-NP CR2E037 (12/06)						
City & State			City & State				4. FEIN	umber 333824	48			Ar	oplied For
Zip	Country	Zij	P	Cou	intry		5. Certif	icate of S	status Desire	d []		8.75 Add	litional
	6. Name and Address of Current	Register	ed Agent			•	7. Name	and Add	dress of Nev	w Registere	d Ag	ent	
CONDOMINIUM ASSOCIATES					Name								
3001 EXECUTIVE DRIVE, #260 CLEARWATER, FL 33762					Street Address (P.O. Box Number is Not Acceptable)								
												- A	
					City					F		Zip Cod	
	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent.				d Agent signati				Title State of	DATI		rimar with,	and accept
	Filing Fee is \$61.25 Due by May 1, 2007		9. Election Camp Trust Fund Co			_ <b>\$</b>	5.00 N Added to	May Be Fees	F	Make che lorida Dep		-	
10.	OFFICERS AND DIF	RECTORS		11.		AC	DOITIONS	CHANG	ES TO OFFI	CERS AND	DIRE	CTORS IN	10
TITLE	PD VELLEY IOE		☐ Delete	TITLI							0	Change	Addition
NAME STREET ADDRESS	KELLEY, JOE 2547 EAGLE CROSSING DR			NAM	ET ADDRESS								
CITY-ST-ZIP	CLEARWATER, FL 33762				-ST-ZIP								
TITLE	D		☐ Delete	TITLI	<u> </u>						[	Change	☐ Addition
NAME	GANSULI, OSH			NAM									
STREET ADDRESS CITY-ST-ZIP	2536 EAGLES CROSSING DR CLEARWATER, FL 33762				ET ADDRESS -ST-ZIP								
TITLE	D		Delete	TITL		Kat	o h	tall.			[	Change	<b>□</b> Addition
NAME	GOFF, DEE			NAM		7514	- ' '	-/-	N mare				
STREET ADDRESS CITY-ST-ZIP	2544 EAGLE CROSSING DR CLEARWATER, FL 33762				ET ADDRESS -ST-ZIP	ر ملاء	> <u>/</u> _0	Janes .	Cross FL	737	. 7		
TITLE	V		☐ Delete	TITL	<del></del>	<u> </u>	. <u>(18 - 19 ) (18 ) (18 ) (18 )</u>	2147				Change	Addition
NAME	CUNNINGHAM, GREG			NAM	_								
STREET ADDRESS CITY-ST-ZIP	2545 EAGLES CROSSING DR				ET ADDRESS -ST-ZIP								
	SD SD S1762		□ Delete	<b>-</b>		-					<del></del> -	☐ Change	Addition
TITLE NAME	DINKMEYER, BRAD		☐ Delete	TITE							ı	Change	
STREET ADDRESS	2564 EAGLE CROSISNG DR				ET ADDRESS								i
CITY-ST-ZIP	CLEARWATER, FL 33762			CITY	-\$T-ZIP								
TITLE			☐ Delete	TITL							[	Change	Addition
NAME				NAM									
STREET ADDRESS CITY-ST-ZIP				1	ET ADORESS - ST-ZIP								
5-11-01-6H				VII.1	J, LH								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIC	:N	ΔTI	IRF.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/07 Date

727-592-9107

Daytime Phone #