2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# N95000004857

Entity Name: FRIENDS OF THE FEATHERED INC.

Current Principal Place of Business:

7410 W NEWCASTLE COURT
DUNNELLON, FL 34433 US

New Principal Place of Business:

Current Mailing Address:

7410 W NEWCASTLE COURT
DUNNELLON, FL 34433 US

New Mailing Address:

FEI Number: 59-3340603 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TALLMAN, CAROL A
7410 W NEWCASTLE COURT
DUNNELLON, FL 34433 US

Name and Address of New Registered Agent:

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:

Title:	P	( ) Delete
Name:	TALLMAN, ALLEN R	
Address:	7410 W NEWCASTLE COURT	
City-St-Zip:	DUNNELLON, FL 34433	
Title:	VD	( ) Delete
Name:	PERRY, MICHAEL	
Address:	427 BROADWAY	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	T	( ) Delete
Name:	TALLMAN, CAROL A	
Address:	7410 W NEWCASTLE COURT	
City-St-Zip:	DUNNELLON, FL 34433	
Title:	D	( ) Delete
Name:	MEGALOUDIS, GARY	
Address:	621 BAYNARD CT	
City-St-Zip:	TARPON SPRINGS, FL 34689	
Title:	D	( ) Delete
Name:	PERRY, DIANE	
Address:	427 BROADWAY	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	S	( ) Delete
Name:	HOVER, MARY	
Address:	2920 ALT 19 SOUTH	
City-St-Zip:	DUNEDIN, FL 34698	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: CAROL A. TALLMAN DIR 04/22/2004
Electronic Signature of Signing Officer or Director — Date