

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000013488

**FILED**  
**Mar 09, 2009**  
**Secretary of State**

**Entity Name:** FEATHERS' HOLDING CORPORATION, INC.

**Current Principal Place of Business:**

161 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870

**New Principal Place of Business:**

161 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870 US

**Current Mailing Address:**

161 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870

**New Mailing Address:**

161 SOUTH COMMERCE AVENUE  
SEBRING, FL 33870 US

**FEI Number:** 65-0561972

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCOLLUM, JAMES F  
129 S. COMMERCE AVENUE  
SEBRING, FL 33870 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: FEATHERS, DANIEL L  
Address: 3802 DUFFER ROAD  
City-St-Zip: SEBRING, FL 33872

Title: PTS ( ) Delete  
Name: FEATHERS, MELVIN L  
Address: 178 LAKE DRIVE BLVD  
City-St-Zip: SEBRING, FL 33875

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DVP (X) Change ( ) Addition  
Name: FEATHERS, DANIEL L  
Address: 3802 DUFFER ROAD  
City-St-Zip: SEBRING, FL 33872 US

Title: DPST (X) Change ( ) Addition  
Name: FEATHERS, MELVIN L  
Address: 178 LAKE DRIVE BLVD  
City-St-Zip: SEBRING, FL 33875 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** MEL FEATHERS

**PRES**

**03/09/2009**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date