#### **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000011098

Entity Name: FEATHEROCK MOBILE HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 06, 2019
Secretary of State
2935830916CC

# **Current Principal Place of Business:**

127 DANNY DR

VALRICO, FL 33594-3119

## **Current Mailing Address:**

P O BOX 1035

VALRICO, FL 33594-1035

FEI Number: 59-2410620 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

GLASSER, ROY A 135 DANNY DRIVE. VALRICO, FL 33594 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: ROY A GLASSER 01/06/2019

Electronic Signature of Registered Agent

Date

Date

#### Officer/Director Detail:

TitlePRESIDENTTitleTREASURERNameCOUSINEAU, MIKENameGLASSER, ROY AAddress127 DANNY DRAddress127 DANNY DR

City-State-Zip: VALRICO FL 33594-3119 City-State-Zip: VALRICO FL 33594-3119

Title VP Title DIRECTOR

NameFITZGERALD, RICHARDNameMELLON, CYNTHIAAddress127 DANNY DRIVEAddress127 DANNY DRIVECity-State-Zip:VALRICO FL 33594City-State-Zip:VALRICO FL 33594

Title DIRECTOR Title DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Name ROBARD, AMY Name GALLIGAN, KATHY
Address 127 DANNY DR Address 127 DANNY DR

City-State-Zip: VALRICO FL 33594-3119 City-State-Zip: VALRICO FL 33594-3119

Title SECRETARY

Name WILSON, MARY LOU

Address 127 DANNY DR

City-State-Zip: VALRICO FL 33594-3119

I hereby 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 all other like empowered.

SIGNATURE: ROY GLASSER TREASURER 01/06/2019