

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000011098

Entity Name: FEATHEROCK MOBILE HOMEOWNERS ASSOCIATION, INC.

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: Yes

Name and Address of Current Registered Agent:

AMBROSE, SUSAN SUSAN AMBROSE
100 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: SUSAN AMBROSE

03/04/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JOHNSTON, DAVID T PRESIDENT
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title PRESIDENT
Name SARTAIN, MARY LOU VICE
PRESIDENT
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title TREASURER
Name EVELYN, BARTON TREASURE
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title O
Name ROBERT, BARTON DIRECTOR
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title SECRETARY
Name AMBROSE, SUSAN SECRETARY
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title OFFICER
Name ERLENDSSON, EINAR DIRECTOR
Address 127 DANNY DR
City-State-Zip: VALRICO FL 33594-3119

Title OFFICER
Name HOINKIS, ROBERT DIRECTOR
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: SUSAN AMBROSE

SECRETARY/AGENT

03/04/2015

Electronic Signature of Signing Officer/Director Detail

Date