## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 21, 2006 8:00 am Secretary of State

1. Entity Nam	MENT #733204 HOMEOWNERS, INC.					etary U 2006 90096 01			
Principal Place of Business Mailing Address 1000 N.W. 68TH AVE. 1000 N.W. 68TH AVE. MARGATE, FL 33063 MARGATE, FL 33063		·							
2. Principal Place of Business 3		3. Mailing Address SAME AS ABOVE		5   III	EM (8811 MH) MIN M	J OKUN EKAN BERN BADU EN	10 B111 B110 B11		
Sille, Adt.	#, etc.	Suite, Apt. #, etc.		01052	2006 Chg-NP	CR2E0	37 (11/05)		
City & State		City & State			Number -1608864		-	oplied For ot Applicable	
Zip	Country	Zip	Country	5. Cert	ificate of Status D	esired 🖫	\$8.75 Add		
	6. Name and Address of Current	Registered Agent		7. Nan	ne and Address o	f New Registered			
ELLIS, JOHN E			Name						
6890 NW 11 COURT MARGATE, FL 33063			Street Ad	Street Address (P.O. Box Number is Not Acceptable)					
1			0.5		<u> </u>		1 7 0 - 4		
·			City	FL   Zip Code					
	named entity submits this statement for tions of registered agent.	or the purpose of changing its r	egistered office or	registered agent	, or both, in the Sta	ate of Florida. I am	tamilar with,	and accept	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signatu	re required when reinsta	iting)	DATE			
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2006	9. Election Carm Trust Fund Co	paign Financing	\$5.00 Added to	May Be		k payable t		
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Carn Trust Fund Co	paign Financing	\$5.00 Added to	May Be	Make chec	rtment of S	tate	
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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.

Changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

### E. Ellis | ### E. Ellis | ### E. | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | ### | #### | ### | ### | ### | ### | ### | ### | #### | #### | #### | #### | #### | #### | ### | #### |