

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 718999**

1. Entity Name

AURORA MINISTRIES, INC.

Principal Place of Business

**12705 ST. RT. 64 E.
BRADENTON FL 34202
US**

Mailing Address

**P.O. BOX 1848
BRADENTON FL 34202
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

23-7178299

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ALEPPO, JOSEPH A.
12705 ST. RT. 64 E.
BRADENTON FL 34202**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DS	☐ Delete
NAME	MADISON, DANIEL Q.	
STREET ADDRESS	12705 ST. RT. 64 E.	
CITY-ST-ZIP	BRADENTON FL 34202	

TITLE	D	☐ Delete
NAME	ROSSI, SANNA B.	
STREET ADDRESS	12705 ST. RT. 64 E.	
CITY-ST-ZIP	BRADENTON FL 34202	

TITLE	DPT	☐ Delete
NAME	ALEPPO, JOSEPH A.	
STREET ADDRESS	12705 ST. RT. 64 E.	
CITY-ST-ZIP	BRADENTON FL 34202	

TITLE	D	☐ Delete
NAME	ALEPPO, GEORGIA R.	
STREET ADDRESS	12705 ST. RT. 64 E.	
CITY-ST-ZIP	BRADENTON FL 34202	

TITLE	D	☐ Delete
NAME	JOHNSON, PHILLIP R	
STREET ADDRESS	P.O. BOX 4000	
CITY-ST-ZIP	PANORAMA CITY CA 91412	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Change ☒ Addition
NAME	McCALL, LARRY, E	
STREET ADDRESS	345 North 175 East	
CITY-ST-ZIP	Warsaw, IN 46580	

TITLE	DT	☐ Change ☒ Addition
NAME	HINES, RICHARD A.	
STREET ADDRESS	12705 St. Rt. 64 E	
CITY-ST-ZIP	Bradenton, FL 34202	

TITLE	DP	☒ Change ☐ Addition
NAME	ALEPPO, JOSEPH A.	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DVP	☒ Change ☐ Addition
NAME	JOHNSON, PHILLIP R.	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**Joseph A. Aleppo****3/20/01**

Date

941-748-4100

Daytime Phone #

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90045 043 ****61.25

C0038007

DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)