

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 15, 2006**  
**Secretary of State**

DOCUMENT# 762411

Entity Name: AURORA HOMES SUBDIVISION HOMEOWNERS, INC.

**Current Principal Place of Business:**

10601 DENALI DRIVE  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

10601 DENALI DRIVE  
CLERMONT, FL 34711 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

HANSON, WARREN F  
10601 DENALI DRIVE  
CLERMONT, FL 34711 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CONWAY, WILLIAM  
Address: 10633 DENALI DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete  
Name: RATAJCZAK, JEFFREY  
Address: 10729 DENALI DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: SD ( ) Delete  
Name: COOPER, MARIE  
Address: 10652 DENALI DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: TD ( ) Delete  
Name: HANSON, WARREN F  
Address: 10601 DENALI DR  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: CYR, JERRY  
Address: 10713 DENALI DRIVE  
City-St-Zip: CLERMONT, FL 34711

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: COLLINS, JAMES  
Address: 10652 DENALI DR.  
City-St-Zip: CLERMONT, FL 34711

Title: SD (X) Change ( ) Addition  
Name: BARTOLETTI, KELLIE  
Address: 10850 DENALI DR.  
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN F. HANSON

TD

01/15/2006

Electronic Signature of Signing Officer or Director

Date