2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004689

FILED Apr 26, 2006 Secretary of State

Entity Name: REAGAN'S RUN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 120173

CLERMONT, FL 34712 US

Current Mailing Address: New Mailing Address:

PO BOX 120173

CLERMONT, FL 34712 US

FEI Number: 59-3445811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILDS, ELLEN LALLY, DON 10448 REAGANS RUN DR. 11718 CONSTANCE WAY CLERMONT, FL 34711 CLERMONT, FL 34711

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: DON LALLY 04/26/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

WILDS, ELLEN LALLY, DON Name: Name: 10448 REAGANS RUN DRIVE Address: 11718 CONSTANCE WAY Address:

City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition SHOTSBERGER, RENA Name: RUSIN, MIKE Name:

Address: 12010 KATHLEEN COURT Address: 10424 REAGANS RUN DR City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition

BURK, DORIS LAPORE, JENNIFER Name: Name: 11933 KATHLEEN CT Address: Address: 11730 CONSTANCE WAY City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

(X) Change () Addition Title: SEC () Delete Title:

NORIIS, TINA Name: WHITE, JACKIE Name: 11712 CONSTANCE WAY Address: 12042 KATHLEEN COURT Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: () Change (X) Addition

CARY, EVELYN Name: Name: 11948 KATHLEEN COURT Address: Address:

City-St-Zip: City-St-Zip: CLERMONT, FL 34711

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: ELLENWILDS Ρ 04/26/2006