

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 20, 2006
Secretary of State**

DOCUMENT# N98000000571

Entity Name: SUNSET VILLAGE AT CLERMONT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. SR. 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 W. SR. 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3538766 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MGMNT, INC.
2180 W SR 434 STE 5000
LONGWOOD, FL 327795044 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: RESCIGNO, HARRY
Address: 1571 SILHOUETTE DR
City-St-Zip: CLERMONT, FL 34711

Title: VPD () Delete
Name: DENOON, DONALD
Address: 1507 SUNDOWN LN
City-St-Zip: CLERMONT, FL 34711

Title: STD () Delete
Name: DORAN, SUSAN
Address: 1541 NIGHTFALL DR
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: HIDLAGO, WILLIAM
Address: 1496 SUNSET VILLAGE BLVD
City-St-Zip: CLERMONT, FL 34711

Title: PD (X) Change () Addition
Name: DENOON, DONALD
Address: 1507 SUNDOWN LN
City-St-Zip: CLERMONT, FL 34711

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: DONALD DENOON

PD

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date