

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749403

FILED
Mar 18, 2009
Secretary of State

Entity Name: HORIZONS CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

1420 N ATLANTIC AVENUE
DAYTONA BEACH, FL 321183557

New Principal Place of Business:

Current Mailing Address:

1420 NORTH ATLANTIC AVENUE
101
DAYTONA BEACH, FL 32118 US

New Mailing Address:

FEI Number: 59-2065130 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DOLLAHITE, DENISE
1420 N. ATLANTIC AVE 101
DAYTONA BCH., FL 32118 US

Name and Address of New Registered Agent:

DOLLAHITE, DENISE
1420 N. ATLANTIC AVE 101
DAYTONA BEACH, FL 32118 US

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: _____ 03/18/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: HUNTER, JACK
Address: 1001 CHAPEL CREEK TRAIL
City-St-Zip: NEW ALBANY, IN 47150

Title: S () Delete
Name: CARVER, ROBERT
Address: 5553 MASTERS BLVD
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: COOK, LARRY
Address: 29480 GREEN ROAD
City-St-Zip: BORDEN, IN 47106

Title: P () Delete
Name: FITZGERALD, BRYAN A
Address: 8437 CAROLINA DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: T () Delete
Name: RITZINGER, PAUL
Address: 1420 N ATLANTIC AVE 501
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: PAUL RITZINGER T 03/18/2009
Electronic Signature of Signing Officer or Director Date