2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# N00000001511

Entity Name: HORIZON COMMUNITIES CORP.

Current Principal Place of Business:

P.O. BOX 2547
WINTER PARK, FL 327902547

New Principal Place of Business:

1736 BARCELONA WAY
WINTER PARK, FL 32789

Current Mailing Address:

P.O. BOX 2547
WINTER PARK, FL 327902547

New Mailing Address:

FEI Number: 59-3637543 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIFFIN, IKE DR.
1736 BARCELONA WAY
WINTER PARK, FL 32789 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: C ( ) Delete
Name: ANDERSON, ROSS
Address: PO BOX 895
City-St-Zip: SHELBURNE, VT 05482

Title: VC ( ) Delete
Name: KEY, JIM
Address: 916 NORTH UNION RD
City-St-Zip: STILLWATER, OK 74075

Title: SD ( ) Delete
Name: MEANS, JACQUELINE REV.
Address: 20585 TAHITIAN BLVD
City-St-Zip: ESTERO, FL 33928

Title: TD ( ) Delete
Name: CLEGG, CAP
Address: 5500 FRANTZ ROAD, S. 166
City-St-Zip: DUBLIN, OH 43017

Title: P ( ) Delete
Name: GRIFFIN, IKE
Address: 1786 BARCELONA WAY
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete
Name: THOMAS, BRYAN
Address: 242 CHASE AVE
City-St-Zip: WINTER PARK, FL 32789

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:

Title: D (X) Change ( ) Addition
Name: GARZA, RUBEN
Address: 2821 ASPEN COURT WEST
City-St-Zip: PLANO, TX 75075

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: IKE GRIFFIN PRES 02/28/2007
Electronic Signature of Signing Officer or Director — Date