2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

DOCUMENT# N47302

Entity Name: HORIZONS OF OKALOOSA COUNTY, INC.

Current Principal Place of Business:

121 & 123 TRUXTON
FT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

123 TRUXTON AVENUE
FT. WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3109969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, DAVID O CEO
123 TRUXTON AVENUE
FT. WALTON BEACH, FL 32547 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: P ( ) Delete
Name: DAN, MARTIN
Address: 800 JUPITER STREET
City-St-Zip: DESTIN, FL 32541

Title: VP ( ) Delete
Name: ROYSTER, SKIP
Address: 904 SKIPPER AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S ( ) Delete
Name: TIDMORE, MAX
Address: 110 CHICAGO AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D ( ) Delete
Name: POOLEY, LESLIE J
Address: 2805 JERRY PATE COURT
City-St-Zip: SHALIMAR, FL 32579

Title: T ( ) Delete
Name: MALLINI, TONY
Address: 140 COUNTRY CLUB ROAD
City-St-Zip: SHALIMAR, FL 32579

Title: D ( ) Delete
Name: KLEINHELTER, BILL
Address: 317 NWJONQUIL AVENUE
City-St-Zip: FT. WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KLEINHELTER, BILL
Address: 317 NW JONQUIL AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

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: MARTIN, DAN
Address: 800 JUPITER STREET
City-St-Zip: DESTIN, FL 32541

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: JANET NANCY EVANS CFO 03/07/2006
Electronic Signature of Signing Officer or Director — Date