## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749403** 

Entity Name: HORIZONS CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

FILED
Mar 04, 2019
Secretary of State
6585417393CC

## **Current Principal Place of Business:**

1420 N ATLANTIC AVENUE
DAYTONA BEACH, FL 32118-3579

## **Current Mailing Address:**

1420 N ATLANTIC AVE

DAYTONA BEACH, FL 32118 US

FEI Number: 59-2065130 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HORIZONS CONDOMINIUM MANAGEMENT ASSOCIATION 1420 N. ATLANTIC AVE OFFICE

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: JOHN BERRY 03/04/2019

Electronic Signature of Registered Agent Date

Title

Officer/Director Detail:

Title PRESIDENT Title VP

Name CLARKE, EUGENE Name COHILL, WILLIAM

Address 1420 N. ATLANTIC AVE., UNIT 1503 Address 1420 N. ATLANTIC AVE

1602

**TREASURER** 

City-State-Zip: DAYTONA BEACH FL 32118

City-State-Zip: DAYTONA BEACH FL 34603

Title SECRETARY

Name PAGLIOCCO, SEBASTIAN Name TALBOT, KERRY

Address P.O. BOX 46

Address P.O. BOX 1489

City-State-Zip: BOXFORD MA 32118-3579 City-State-Zip: ROCKY FACE GA 30740

Title DIRECTOR
Name STONE, JANET

Address 1420 N ATLANTIC AVE.

**UNIT 1601** 

City-State-Zip: DAYTONA BEACH FL 32118

I hereby 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 all other like empowered.

SIGNATURE: EUGENE CLARKE

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/04/2019