

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755574

FILED
Mar 25, 2013
Secretary of State
CC5991412594**Entity Name:** THE HORIZONS WEST PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8504 S.W. 133 AVE. RD.
MIAMI, FL 33183**Current Mailing Address:**8504 S.W. 133 AVE. RD.
MIAMI, FL 33183**FEI Number: 59-2066756****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PAIGE LAW GROUP, P.A.
9500 SOUTH DADELAND BLVD.
SUITE 550
MIAMI, FL 33156 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title TREASURER
Name TIMM, RON
Address 8500 SW 133 AVE RD
 # 312
City-State-Zip: MIAMI FL 33183

Title VP
Name PILLOT, CARMEN
Address 8400 SW 133 AVE RD
 # 416
City-State-Zip: MIAMI FL 33183

Title SECRETARY
Name GORI, MARIA JOSEFINA
Address 8650 SW 133 AVE RD
 # 419
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name WILLIAMS, ANGELA
Address 8700 SW 133 AVE RD
 # 414
City-State-Zip: MIAMI FL 33183

Title PRESIDENT
Name MARTINEZ, LILIANNE
Address 8760 SW 133 AVE RD
 # 320
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name IZADA, NIEVELINA
Address 8540 SW 133 AVE RD
 # 311
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name MARCHENA, IVAN
Address 8520 SW 133 AVE RD
 # 318
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name XENES, AMARILYS
Address 8730 SW 133 AVE RD
 # 120
City-State-Zip: MIAMI FL 33183

Continues on page 2

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: LILIANNE MARTINEZ**PRESIDENT****03/25/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PARMAR, NARENDRA
Address 8600 SW 133 AVE RD
218
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name PUIG SANTIAGO, ROSARIO
Address 8420 SW 133 AVE RD
109
City-State-Zip: MIAMI FL 33183