

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001511

Entity Name: HORIZON COMMUNITIES CORP.**Current Principal Place of Business:**1700 N. MONROE ST.
SUITE 11-185
TALLAHASSEE, FL 32303**Current Mailing Address:**1700 N. MONROE ST.
SUITE 11-185
TALLAHASSEE, FL 32303 US**FEI Number:** 59-3637543**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCHAIDT, NATHAN
2018 LAWSON RD.
TALLAHASSEE, FL 32308 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:** NATHAN SCHAIDT

02/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	OFFICER
Name	ABBERGER, LESTER
Address	P.O. BOX 1168
City-State-Zip:	TALLAHASSEE FL 32302

Title	SECRETARY
Name	HAMMOND, STEVEN PHD
Address	2823 SHAMROCK NORTH
City-State-Zip:	TALLAHASSEE FL 32309

Title	TREASURER
Name	THAVER, RANJINI
Address	3245 S. ATLANTIC AVE.
City-State-Zip:	DAYTONA BEACH SHORES FL 32118

Title	PCEO
Name	SCHAIDT, NATHAN
Address	2018 LAWSON RD
City-State-Zip:	TALLAHASSEE FL 32308

Title	OFFICER
Name	WILLIAMS, ANNE
Address	4835 ANDRADE
City-State-Zip:	PENSACOLA FL 32504

Title	OFFICER
Name	BELL, JOSHUA
Address	230 MERIDIAN HILLS RD.
City-State-Zip:	TALLAHASSEE FL 32312

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: SCHAIDT, NATHAN

PCEO

02/03/2023

Electronic Signature of Signing Officer/Director Detail

Date