

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47302

Entity Name: HORIZONS OF OKALOOSA COUNTY, INC.**Current Principal Place of Business:**123 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547**Current Mailing Address:**123 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547**FEI Number:** 59-3109969**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCNABB, JULIA J. CEO
123 TRUXTON AVENUE
FT. WALTON BEACH FL 32547 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:** JULIA MCNABB

01/08/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name MCNABB, JULIA
Address 506 MOONEY ROAD
City-State-Zip: FORT WALTON BEACH FL 32547

Title CFO
Name HUEBNER, THOMAS C
Address 307 EVERGREEN AVE
City-State-Zip: NICEVILLE FL 32578

Title PRESIDENT
Name HOOKS, WALTER
Address 25 NE BEAL PARKWAY
City-State-Zip: FORT WALTON BEACH FL 32548

Title SECRETARY
Name HOLMES, JULIA B
Address P.O. BOX 711
City-State-Zip: FORT WALTON BEACH FL 32549

Title TREASURER
Name TURPIN, MATT
Address 151 MARY ESTHER BLVD
301
City-State-Zip: MARY ESTHER FL 32541

Title VP
Name PRITCHARD, KATHLEEN
Address 5 CALHOUN AVENUE #301
City-State-Zip: DESTIN FL 32541

Title DIRECTOR
Name CAMPBELL, WAYNE
Address 1601 GUM CREEK COVE
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name COMER, RICHARD
Address 440 RUCKEL DRIVE
City-State-Zip: NICEVILLE FL 32578

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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: THOMAS HUEBNER

C.F.O.

01/08/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GRISSOM, RON
Address 140 HOLLYWOOD BOULEVARD SW
City-State-Zip: FORT WALTON BEACH FL 32548

Title VICE TREASURER
Name MALLINI, TONY
Address 1054 ROXANNA RD
City-State-Zip: FORT WALTON BEACH FL 32547

Title DIRECTOR
Name PLASTER, MICHAEL
Address 200 MIRACLE STRIP PKWY SW
501
City-State-Zip: FORT WALTON BEACH FL 32548

Title DIRECTOR
Name SPENSER, LISA JO
Address 1283 EGLIN PARKWAY NORTH
City-State-Zip: SHALIMAR FL 32579

Title DIRECTOR
Name ANNA, GARLAND
Address 1528 VENICE AVENUE
City-State-Zip: FORT WALTON BEACH FL 32547