2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47302

Entity Name: HORIZONS OF OKALOOSA COUNTY, INC.

FILED
Mar 10, 2016
Secretary of State
CC7829278607

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: No

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 03/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

 Title
 CEO
 Title
 TREASURER

 Name
 MCNABB, JULIA
 Name
 TURPIN, MATT

Address 506 MOONEY ROAD Address 151 MARY ESTHER BLVD

301

DIRECTOR

MARY ESTHER FL 32541

City-State-Zip:

Title

Title

City-State-Zip: FORT WALTON BEACH FL 32547

Title CFO

Name MATHES, DONNA Name PRITCHARD, KATHLEEN

Address 34 CHOCTAWATCHEE RD SE

Address 5 CALHOUN AVENUE #301

City-State-Zip: FORT WALTON BEACH FL 32548

City-State-Zip: DESTIN FL 32546

Title PRESIDENT

Name HOOKS, WALTER Name CAMPBELL, WAYNE

Address 25 NE BEAL PARKWAY Address 1601 GUM CREEK COVE

City-State-Zip: FORT WALTON BEACH FL 32548 City-State-Zip: NICEVILLE FL 32578

Title SECRETARY Title DIRECTOR

Name HOLMES, JULIA B Name COMER, RICHARD

Address P.O. BOX 711 Address 440 RUCKEL DRIVE

City-State-Zip: FORT WALTON BEACH FL 32549 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: DONNA MATHES CFO 03/10/2016

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