2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

248655

DOCUMENT # 1. Entity Name

HORIZON HOUSE, INC. OF CLEARWATER.



FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90015 010 ***150.00

|--|

Standown								33.5				
Suite, April 4, etc. Suite, April 4, etc. Suite, April 4, etc. Suite, April 4, etc. Suite, April 4, etc. Suite, April 4, etc. Suite, April 4, etc. A FEI Number 59-1097482 Appelect For Development of the Country Zip Country Zip Country S. Certificate of Status Desired SA.75 Additional Fee Required Fee Required SA.75 Additional Fee Required Fee Required Sa. Name and Address of Current Registered Agent Name Name Steed Address (PO Box Number is Not Acceptable) ERICKSON, NEWELL Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed Address (PO Box Number is Not Acceptable) IN IT 208 Steed Address (PO Box Number is Not Acceptable) Steed	31 ISLAND WAY			31 ISLAND WAY								
City & States City &	Principal Place of Business											
Set District Desired Zip Country Zip Country Set Cou	Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				☐ CHECK HERE IF MA	KING CHANGE	es .		
Secret Color Secr	City & Stat	e		City & State				4	59-1110/482			
ERICKSON, NEWELL 31 ISLAND WAY UNIT 1208 CLEARWATER FL 33767 Cay Cley FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Piglidad Department of State 10. OFFICERS AND DIRECTORS TILL MORE STRIPL AUDITORS STRIPL AUDITORS/CHANGES TO OFFICERS AND DIRECTORS IN 11 NAME STRIPL AUDITORS/CHANGES TO OFFICERS AND DIRECTORS IN 11 NAME STRIPL AUDITORS AUDITORS STRIPL AUDITORS STRIPL AUDITORS STRIPL AUDITORS CLEARWATER FL 33767 CLEARWATER FL 33767 TILL MADSWORTH, KENNETH STRIPL AUDITORS CLEARWATER FL 33767 CL	Zip Country			Zip Count			try	5 Certificate of Status Desired S8.75 Additional				
ERICKSON, NEWELL 31 ISLAND WAY UNIT 1208 CLEARWATER FL 33767 8. 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. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent, or regi		l Agent			7	Name and Address of New Registr						
Site Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)	or mains and nadious of salitative registered agent						Name					
31 ISLAND WAY UNIT 1208 CLEARWATER FL 33767 8. 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. Tam familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$55.00 Make Check Payable to Fignida Department of State 10. OFFICIERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MAKE STREET ADDRESS COTY-ST-2P CLEARWATER FL 33767 CLEARWATER FL 3	ERICKSO	N. NEWELL	್ ಕಲಕ್ಕಿ <i>ಚ</i> ಿ	•								
UNIT 1208 CLEARWATER FL 33767 City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 After	·						Street Address (P.O. Box Number is Not Acceptable)					
CLEARWATER FL 33767 City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signalure, typed or princed name of registered agent. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Flightade Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE WARREST ADDRESS STREET ADDRESS CITY ST. 2P CLEARWATER FL 33767 TITLE WASWORTH, KENNETH WADSWORTH, KENNETH WADSWORTH WADSWORTH, KENNETH WADSWORTH, KENNETH WADSWORTH WADSWORTH W												
B. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or ormited nerve of registered agent and this "asolicable. PAGE												
THE CODIGISTIONS of registered agent. Signature Signature, speed or printed name of registered agent and feet "applicable. NOTE Registered Agent agentaine required when remotating) DATE	CLEARWATER FL 33/6/						City			FL Zip Ci	ode	
ARTER May 1, 2003 fee will be \$50.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE STUNTZ, JUANITA 31 ISLAND WAY, \$406 CITY-ST-ZP CLEARWATER FL 33767 TITLE WADSWORTH, KENNETH 31 ISLAND WAY, #504 CLEARWATER FL 33767 TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZP CLEARWATER FL 33767 TITLE PICKFORD, ROBERT TITLE PICKFORD, ROBERT TITLE PICKFORD, ROBERT TITLE PICKFORD, MEWELL STREET ADDRESS STREET ADDRESS CITY-ST-ZP CLEARWATER FL 33767 CITY-ST-ZP CLEARWATER FL 33767 TITLE PICKFORD, MEWELL STREET ADDRESS STREET AD	the obligat	Signature, typed	ered agent. or printed name of registered agent ! FEE IS \$150.00						en reinstating) [DATE		
TITLE NAME STUNTZ, JUANITA STREET ADDRESS CLEARWATER FL 33767 TITLE WADSWORTH, KENNETH WADSWORTH, KENNETH STREET ADDRESS CLEARWATER FL 33767 TITLE WADSWORTH, KENNETH STREET ADDRESS CLEARWATER FL 33767 TITLE S CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767 TITLE CHURCH, ANNE STREET ADDRESS CLEARWATER FL 33767 TITLE S CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP COTY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP COTY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP COTY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767				of State								
STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE PASMUSSEN, GLORIA STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP D RASMUSSEN, GLORIA STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS ST	10.		OFFICERS AND	DIRECTOR	S	11.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 11	
STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE PASMUSSEN, GLORIA STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP D RASMUSSEN, GLORIA STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS ST	TITLE	1 **	•		Delete	TITLE		BRA	NO FRED (D) A	´ 🔲 Chang	Addition	
STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE PASMUSSEN, GLORIA STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE AMP D RASMUSSEN, GLORIA STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS ST	NAME							31 1	SLAND WAY #1407		:	
TITLE WADSWORTH, KENNETH NAME SIREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767								015	ARWATER FL 33	3767	;	
SIREL ADDRESS OCITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767	CITY-ST-ZIP		1EH FL 33/6/			CITY	-ST-ZIP					
SIREL ADDRESS OCITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767	* -	i •			Delete			CHU	RCH, ANNE	☐ Chang	e 🗹 Addition	
SIREL ADDRESS OCITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767								31	ISLAND WAY #3	306	1	
TITLE NAME PICKFORD, ROBERT STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME ERICKSON, MEWELL STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME ERICKSON, MEWELL STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME ERICKSON, MEWELL STREET ADDRESS CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767											}	
NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767	3	+	TEN FE 33/0/						, , , , ,			
STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767			DOBEDT		∟ Delete	1		مرجعانا	J. HARRY .		Addition	
CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767				-	~			31 1	SLAND WAY \$14	-03.		
TITLE P GRICKSON, MEWELL NAME ERICKSON, MEWELL STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS TREET ADDRESS TITLE TITLE NAME TITLE NAME TRAIN, TOM TITLE NAME TRAIN, TOM TITLE NAME TRAIN, TOM TITLE NAME TRAIN, TOM TITLE TOWN THE CHANGE TREET ADDRESS TREET												
RAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767	TITLE	n			☐ Delete	TITLE					Addition	
STREET ADDRESS 31 ISLAND WAY #1208 CITY-ST-ZIP CLEARWATER FL 33767 TITLE AVP D RASMUSSEN, GLORIA STREET ADDRESS 31 ISLAND WAY #104 CITY-ST-ZIP CLEARWATER FL 33767 TITLE RASMUSSEN, GLORIA STREET ADDRESS 31 ISLAND WAY, #807 CITY-ST-ZIP CLEARWATER FL 33767 TITLE D CLEARWATER FL 33767 CHANGE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 CHANGE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 CHANGE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 CHANGE CLEARWATER FL 33767 CHANGE CHANGE CHANGE CHANGE CITY-ST-ZIP CLEARWATER FL 33767		ERICKSON	i, îiewell			NAM	E	PET	RAS, JAMES III	_ •		
TITLE AMP D NAME RASMUSSEN, GLORIA STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 Delete TITLE NAME RASMUSSEN, GLORIA STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 TITLE DELET CLEARWATER FL 33767 TITLE Change Change Change Change CHAddition NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP CLEARWATER FL 33767	STREET ADDRESS					STRE	ET ADDRESS_	311	SLAND WAY #100	21		
NAME RASMUSSEN, GLORIA STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 NAME STREET ADDRESS 31 ISLAND WAY, #807 CITY-ST-ZIP CLEARWATER FL 33767 NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767	CITY-ST-ZIP	CLEARWA	TER FL 33767			CITY	-ST-ZIP	CLEA	RWATER FL 337	167		
STREET ADDRESS 31	TITLE				Delete	TITLE		D	- mary Adde	☐ Change	Addition	
CITY-ST-ZIP CLEARWATER FL 33767	NAME							ROSE	IN AND WAY HE	od		
TITLE								1				
NAME FRAIN, TOM NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 33767 NAME STREET ADDRESS CITY-ST-ZIP			IER FL 33/8/			-		CLEI	ARWATER FL			
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	•	. –	A		☐ Delete					☐ Change	e	
CITY-ST-ZIP CLEARWATER FL 33767 CITY-ST-ZIP												
12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information				this filing d	oes not qualify for			ed in Section	on 119.07(3)(i) Florida Statutes I furthe	er certify that the	e information	

indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other-like empowered.