2001 UNIFORM BUSINESS REPORT (UBR)

P01192

DOCUMENT # 530881

1. Entity Name

HORIZON MANAGEMENT SERVICES, INC.

FILED
01 JAN 25 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
% THE PRENTICE HALL CORPORATION SYSTEM INC 1201 HAYS STREET. STE. 105 TALLAHASSEE FL 32301 US	% THE PRENTICE HALL CORPORATION SYSTEM INC 1201 HAYS STREET. STE. 105 TALLAHASSEE FL 32301 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2193986 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP ANDERSEN, ROBERT L 301 S. COLLEGE STREET CHARLOTTE NC 28288-0630	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP Andersen, Robert L. 301 S. College St. Charlotte, NC 28288-0630	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MILLER, JERRY M JR. 301 S. COLLEGE ST. CHARLOTTE NC 28288-0630	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Dubie, Carol A. 1339 Chestnut St. Philadelpha, PA 19107	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DVAIES, CHRISTOPHER D 301 S. COLLEGE STREET CHARLOTTE NC 28288-0630	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP Davis, Christopher D. 301 S. College St. Charlotte, NC 28288	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CARROLL, DAVID M 301 S. COLLEGE STREET CHARLOTTE NC 28288	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President & Director Holt, David 1100 Corporate CIR., Dr. Raleigh, NC 27607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	300003575885	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SP	☐ Change ☐ Addition

CR2E034 (10/00)

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert L. Andersen Robert L. Andersen 1/23/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 978105 167868A

AUTHORIZATION : Patricia Piggott

COST LIMIT : $ 150.0

ORDER DATE : January 25, 2001

ORDER TIME : 3:59 PM

ORDER NO. : 978105-015

CUSTOMER NO: 167868A

CUSTOMER: Ms. Aprille M. Mitchell
First Union Corporation
One First Union Center, Nc0630
Legal Division-31st Floor
Charlotte, NC 28288-0630

ANNUAL REPORT FILING

NAME: HORIZON MANAGEMENT SERVICES, INC.

RECEIVED
01 JAN 25 PM 4:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

XX___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - Ext. 1133

EXAMINER'S INITIALS: _____