

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90047 028 ****61.25

DOCUMENT # 750042

1. Entity Name

HORIZON CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

600 OCEAN DRIVE
 JUNO BCH. FL 33408

600 OCEAN DRIVE
 JUNO BCH. FL 33408-1920

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

59-2131533

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

ALESSI, MARIE
 600 OCEAN DRIVE 6B
 JUNO BEACH FL 33408

Name **George Stamatiades**
 Street Address (P.O. Box Number is Not Acceptable)
600 Ocean Drive #6A
0
 City **Juno Beach** **FL** Zip Code **33408**

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 **GEORGE STAMATIADES**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **5-13-00**

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
 NAME **ALESSI, MARIE**
 STREET ADDRESS **600 OCEAN DRIVE #6B**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE **HERB ALLEN** ☐ Change ☒ Addition
 NAME **600 OCEAN DR. #11B**
 STREET ADDRESS **JUNO BEACH, FL. 33408**
 CITY-ST-ZIP **TD**

TITLE **VPD** ☒ Delete
 NAME **HOFMANN, ROBERT**
 STREET ADDRESS **600 OCEAN DRIVE #9B**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE **SD** ☐ Change ☒ Addition
 NAME **JOSEPH EHRLICH**
 STREET ADDRESS **600 OCEAN DR. #9A**
 CITY-ST-ZIP **JUNO BEACH, FL. 33408**

TITLE **TD** ☒ Delete
 NAME **COMPETELLO, JOHN**
 STREET ADDRESS **600 OCEAN DRIVE #2A**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE **PD** ☒ Change ☐ Addition
 NAME **GEORGE STAMATIADES**
 STREET ADDRESS **600 OCEAN DR. #6A**
 CITY-ST-ZIP **JUNO BEACH, FL. 33408**

TITLE **SD** ☒ Delete
 NAME **KENNEDY, HELEN**
 STREET ADDRESS **600 OCEAN DRIVE #12A**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☒ Delete
 NAME **STAMATIADES, GEORGE**
 STREET ADDRESS **600 OCEAN DRIVE #6A**
 CITY-ST-ZIP **JUNO BEACH FL 33408**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 617, 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.

SIGNATURE: **GEORGE STAMATIADES**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **5-13-00**

Date

Daytime Phone #

718-729-3400

CR2E037 (9/99)