

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 755574 1. Entity Name THE HORIZONS WEST PROPERTY OWNERS ASSOCIATION, INC.						FILED 08 JUL 18 AM 10:23 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 8504 S.W. 133 AVE. RD. MIAMI, FL 33183				Mailing Address 11981 SW 144 CT SUITE #201 MIAMI, FL 33186			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent SKRLD, IINC 201 ALHAMBRA CIR STE 1102 MIAMI, FL 33134				7. Name and Address of New Registered Agent Name Robert Paige Esq Street Address (P.O. Box Number is Not Acceptable) 9500 South Dadeland Blvd Suite 550 City Miami, FL Zip Code 33156			
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 7/14/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State							
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARINELVA, MIRANDA 8700 SW 133RD AVE. RD. UNIT 305 MIAMI, FL 33183	☒ Delete					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES GONZALEZ, LAURA LISA 8730 SW 133 AVE RD #323 MIAMI, FL 33183	☐ Delete					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARTINEZ, LILY 8760 SW 133 AVE RD., #320 MIAMI, FL 33183	☐ Delete					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JUNCO, PEDRO 8540 SW 133RD AVE. RD. UNIT 410 MIAMI, FL 33183	☐ Delete					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LORING, BEA 8400 SW 133 AVE RD #210 MIAMI, FL 33183	☐ Delete					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(D) JAVIER RUIZ 8500 SW 133 AVE RD #203 MIAMI, FL 33183 ☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(D) IVAN MARCHENA 8520 SW 133 AVE RD #318 MIAMI, FL 33183 ☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(D) KATHRYN WILLIAMS 8700 SW 133 AVE RD #411 MIAMI, FL 33183 ☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(D) MARIA JOSEFINA GORRI 8650 SW 133 AVE RD #419 MIAMI, FL 33183 ☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(Empty)					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		(Empty)					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:				6/17/08 (305) 387-0462			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #			