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FILED  
Feb 16 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 755575 (8)

THE HORIZONS WEST CONDOMINIUM NO. 1 ASSOCIATION, INC.

Principal Place of Business

Mailing Address

8400 SW 133 AVENUE RD.  
#221  
MIAMI FL 33183

C/O COURTESY PROPERTY  
9380 SUNSET DR B-250  
MIAMI FL 33173  
US

3. Date Incorporated or Qualified

12/16/1980

4. FEI Number

59-2066758

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORA, REINA  
8400 SW 133 AVENUE ROAD, #221  
MIAMI FL 33183

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P.D. ☐ DELETE

NAME MORA, REINA  
STREET ADDRESS 8400 SW 133RD AVE RD #221  
CITY-ST-ZIP MIAMI FL 33183

TITLE DVP ☒ DELETE

NAME ~~EVIN, LILIAN~~  
STREET ADDRESS ~~8400 SW 133RD AVE RD #404~~  
CITY-ST-ZIP MIAMI FL

TITLE DV ☒ DELETE

NAME ~~EVIN, LILIAN~~  
STREET ADDRESS ~~8400 SW 133RD AVE RD #404~~  
CITY-ST-ZIP MIAMI FL

TITLE TS.D. ☐ DELETE

NAME GUASCH, CARMEN  
STREET ADDRESS 8400 SW 133RD AVE RD #412  
CITY-ST-ZIP MIAMI FL 33183

TITLE D ☐ DELETE

NAME GITTO, MARY  
STREET ADDRESS 8400 SW 133RD AVE RD #123  
CITY-ST-ZIP MIAMI FL 33183

TITLE D ☒ DELETE

NAME ~~EVIN, LILIAN~~  
STREET ADDRESS ~~8400 SW 133RD AVE RD #404~~  
CITY-ST-ZIP MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME P  
1.3 STREET ADDRESS MORA, REINA  
1.4 CITY-ST-ZIP 8400 S.W. 133 Ave. Rd. #221  
Miami, FL 33183

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME ST GUASCH, CARMEN  
2.3 STREET ADDRESS 8400 S.S. 133 Ave. RD. #412  
2.4 CITY-ST-ZIP Miami, FL 33183

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

**PAID**

CR# 20234 DATE 1/9/98

GL# 70240 AMT 70.00

GL# AMT

GL# AMT

PREPARED BY MGR. APPROVAL

300002432373

D 02/17/98 01010-0

GITTO, MARY

8400 S.W. 133 Ave. Rd. #123  
Miami, FL 33183

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Resignation Required*

1-9-98