

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 16 AM 11:37



1. Name of Limited Partnership

1a. DOCUMENT #
A94000001072

HORIZON ONE, LTD.

Mailing Address

Principal Office Address

~~201 E. KENNEDY BLVD., #1516
TAMPA FL 33602~~

~~201 E. KENNEDY BLVD., #1516
TAMPA FL 33602~~

3. Date Formed or Registered

08/04/1994

5a. Capital Contributions as Shown on record.

\$10,000,000.00

3a. Date of Last Report

04/29/1996

5b. Amount of Capital Contributions in FLORIDA to date:

4. State or Country of Formation

FL

6. FEI Number

59-3261323

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

101 EAST KENNEDY BLVD

2a. Principal Office Address

101 EAST KENNEDY BLVD

Suite, Apt. #, etc.

Suite 2450

Suite, Apt. #, etc.

Suite 2450

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

33602

Country

Zip

33602

Country

9. Name and Address of Current Registered Agent

**HENLEY, PAUL A
201 EAST KENNEDY BLVD., SUITE 1516
TAMPA FL 33602**

10. If changed, new Registered Agent/Office

Name

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

101 E. Kennedy Blvd.

Suite, Apt. #, etc.

Suite 2450

City

Tampa, FL

State

FL

Zip Code

33602

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s) and by the affirmative vote of the registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

**HENLEY, PAUL A
HORIZON CAPITAL MANAGEMENT I**

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

**201 E. KENNEDY BLVD.,
201 E. KENNEDY BLVD.,**

11b. City, State & Zip Code

**TAMPA FL 33602
TAMPA FL 33602**

11c. Registration/Document Number

P94000023949

600002241676--6

**07/18/97--01093--005
****558.75 ****558.75**

**Same As Above
101 E. Kennedy Blvd
Suite 2450
Tampa, FL 33602**

REINSTATEMENT

**97 cu
du**

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (11/96)