

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 SEP 25 AM 10:04

1. Name of Limited Partnership

1a. DOCUMENT #
A97000001879

HORIZON STRATEGIC INCOME, LTD.



Mailing Address

101 E. KENNEDY BLVD., SUITE 2450
TAMPA FL 33602

Principal Office Address

101 E. KENNEDY BLVD., SUITE 2450
TAMPA FL 33602

3. Date Formed or Registered

08/29/1997

5a. Capital Contributions as
Shown on record.

\$2,000,000.00

3a. Date of Last Report

02/09/1998

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

4. State or Country of Formation

FL

2. Mailing Address

3740 Longship Place

2a. Principal Office Address

311 Park Place Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Clearwater, FL

Zip

33607 USA

Zip

33759 USA

6. FEI Number

59-3466391

☐ 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)

9. Name and Address of Current Registered Agent

HENLEY, PAUL
101 E. KENNEDY BLVD., SUITE 2450
TAMPA FL 33602

10. If changed, new Registered Agent/Office

Name: Wright Martindale
Street Address (P.O. Box Number is Not Acceptable):
3740 Longship Place
Suite, Apt. #, etc.

City

Tampa

FL

Zip Code

33607

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). I hereby accept the appointment of registered agent. I am familiar with, and accept the provisions of, section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE 9/20/98

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)

HORIZON CAPITAL MANAGEMENT,

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

101 E. KENNEDY BLVD.,
3740 Longship Pl.

11b. City, State & Zip Code

TAMPA FL 33602
Tampa FL, 33607

11c. Registration/
Document Number

P04000023949

800002651418-4
-09/29/98-01040-010
*****526.25 *****526.25

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 9/9/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)