

Division of Corporations
F10060000264
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

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RECEIVED
10 JAN 19 PM 3:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

new horizons inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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2010 JAN 19 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

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January 19, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: NEW HORIZONS INC. TRADING AS CAMPOUT
REF: W10000002481

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please accept our apology for failing to mention this in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II
New Filing Section

FAX Aud. #: E10000007667
Letter Number: 410A00001384

P.O. BOX 6327 - Tallahassee, Florida 32314

H10000007667

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA**

1. NEW HORIZONS INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"INC.," "CO.," "CORP.," "LLC," "CO.," or "Corp.")

New Horizons Inc. Trading as Camp Out
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW JERSEY 3. 221932549
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JULY 29TH 1971 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 01/01/2010
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 23905 S.W. 132ND AV MIAMI FLORIDA 33032
(Principal office address)

23905 S.W. 132ND AV. MIAMI FLORIDA 33032
(Current mailing address)

8. TRUCK CAPS & ACCESSORIES UTILITY TRAILERS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: GREGORY SCOTT

Office Address: 23905 S.W. 132ND AV.

MIAMI

(City)

Florida 33032
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity, and further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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FILED

2010 JAN 19 PM 1

SECRETARY OF STATE
TALLAHASSEE, FL

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: MARIE SCOTT
Address: 1074 RT 173
ASBURY N.J. 08802

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MARIE SCOTT
Address: 1074 RT 173
ASBURY N.J. 08802

Vice President: GREGORY SCOTT
Address: 12339 SW 249TH ST.
MIAMI FL 33032

Secretary: CHRISTOPHER SCOTT
Address: 1074 RT 173 ASBURY N.J. 08802

Treasurer: CHRISTOPHER SCOTT
Address: 1074 RT 173 ASBURY N.J. 08802

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. GREGORY SCOTT V.P., RA
(Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

VICE President: MICHAEL SCOTT

Address: 1074 RT 173

ASBURY N.J. 08802

VICE Vice President: ANDREW SCOTT

Address: 1074 RT 173

ASBURY N.J. 08802

VICE PRESIDENT Secretary: CATHERINE SCOTT

Address: 1074 RT 173 ASBURY N.J. 08802

VICE PRESIDENT Treasurer: ANTHONY SCOTT

Address: 1074 RT 173 ASBURY N.J. 08802

NOTE: If necessary, you may attach an addendum to this application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

(Typed or printed name and capacity of person signing application)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: ROBERT SCOTT

Address: 1074 RT 173

ASBURY N.J. 08802

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

H10000007667

NEW HORIZONS INC.

6472941100

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on July 29, 1971.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

2009

I further certify that the registered agent and registered office are:

Marie A Scott
279 Rt 173
West Portal, NJ 08802 0000



Certification# 116101240

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
6th day of January, 2010*

*R. David Rosenberg
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandbyCertWEB/Verify_Cert.jsp

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