2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001735

Entity Name: HORIZON RETAIL CONSTRUCTION, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
1458 HOR RACINE, \	RIZON BLVD WI 53406		1500 HORIZON DRIVE STUTREVANT, WI 53		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1458 HORIZON BLVD RACINE, WI 53406				1500 HORIZON DRIVE STUTREVANT, WI 53177	
FEI Number	: 39-1753492	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of	New Registered Agent:	
PLANTAT The above in the State	e of Florida.	4 US	purpose of changing its registered	l office or registered agent, or both,	
SIGNATU				Dete	
Election Ca		nic Signature of Registered Ago	ent	Date	
		• (,			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name:				S TO OFFICERS AND DIRECTOR	
Address: City-St-Zip:	SD () HENDERSEN, 1826 CRESTW CALEDONIA, V	OOD DR.	Title: Name: Address: City-St-Zip:	S TO OFFICERS AND DIRECTOR () Change () Addition	
Address:	HENDERSEN, 1826 CRESTW CALEDONIA, V PD (CHRISTENSEN 9001 LAKESHO	JON E /OOD DR. VI 53108) Delete I, PATRICK J	Name: Address: City-St-Zip:		
Address: City-St-Zip: Title: Name: Address:	HENDERSEN, 1826 CRESTW CALEDONIA, V PD (CHRISTENSEN 9001 LAKESHO PLEASANT PR	JON E /OOD DR. VI 53108) Delete N, PATRICK J DRE DRIVE AIRIE, WI 53158) Delete EL A DD CT.	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	HENDERSEN, 1826 CRESTW CALEDONIA, V PD (CHRISTENSEN 9001 LAKESHO PLEASANT PR VD (SIUDAK, DANIE 6541 HILLWOO RACINE, WI 5	JON E //OOD DR. VI 53108) Delete I, PATRICK J DRE DRIVE AIRIE, WI 53158) Delete EL A DD CT. 3403) Delete HOMAS J	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS J. SCHEFER TD 04/13/2009