2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 11, 2005 08:00 AM Secretary of State **DOCUMENT # L01000018246** 1. Entity Name HORTON HOLDINGS, LLC Principal Place of Business Mailing Address 6020 ADAMO DRIVE 6020 ADAMO DRIVE TAMPA, FL 33619 TAMPA, FL 33619 03252005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3750723 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HORTON, OSCAR J DO NOT WRITE 6020 ADAMO DRIVE TAMPA, FL 33619 ... IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 U000000299309 MANAGING MEMBERS/MANAGERS 9. ST TITLE HOCKEMEYER, KATHY NAME 6020 ADAMO DRIVE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33619 TITLE HORTON, OSCAR NAME 6020 ADAMO DRIVE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33619 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THE SIGNATURE AND 18/PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

4/4/2005 813-621-133/

FILED