

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90180 040 ****50.00

DOCUMENT # L05000034973

1. Entity Name

HORIZONS DEVELOPMENT, LLC



Principal Place of Business

6000 METRO WEST BOULEVARD, SUITE 105
ORLANDO, FL 32835

Mailing Address

6000 METRO WEST BOULEVARD, SUITE 105
ORLANDO, FL 32835



04042007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2824582

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ORDEN, CHARLES
6000 METRO WEST BOULEVARD, SUITE 105
ORLANDO, FL 32835

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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)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME ORDEN, CHARLES
STREET ADDRESS 6000 METRO WEST BLVD SUITE 105
CITY-ST-ZIP ORLANDO, FL 32835

TITLE MGRM
NAME KANTOR, JOSEPH
STREET ADDRESS 6000 METRO WEST BLVD SUITE 105
CITY-ST-ZIP ORLANDO, FL 32835

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 oath; 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #