

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098111

**FILED**  
**Jan 19, 2009**  
**Secretary of State**

**Entity Name:** HORIZONTAL DEVELOPMENT, LLC

**Current Principal Place of Business:**

1109 NW 13TH STREET  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

3600 SW 23RD ST APT #A-1  
GAINESVILLE, FL 32608

**Current Mailing Address:**

1109 NW 13TH STREET  
GAINESVILLE, FL 32601

**New Mailing Address:**

P.O. BOX 141544  
GAINESVILLE, FL 32614

**FEI Number:** 20-3684221

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITE, DANIEL T  
1115 NW 13TH ST  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GIBBS, WILLIAM K  
Address: 8237 SWAN LAKE RD.  
City-St-Zip: MELROSE, FL 32666 US

Title: MGRM ( ) Delete  
Name: HIGGINBOTHAM, EDDIE J  
Address: PO BOX 141544  
City-St-Zip: GAINESVILLE, FL 32614 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic 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: EDDIE J. HIGGINBOTHAM

MGRM

01/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date