# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 28, 2009**
**Secretary of State**

DOCUMENT# L06000065840

**Entity Name:** HORIZONS REWARDS LLC

**Current Principal Place of Business:**

201 SOUTH ORANGE AVE
STE 1030
ORLANDO, FL 32801 US

**New Principal Place of Business:**

2200 LUCIEN WAY
SUITE 330
MAITLAND, FL 32751 US

**Current Mailing Address:**

201 SOUTH ORANGE AVE
STE 1030
ORLANDO, FL 32801 US

**New Mailing Address:**

2200 LUCIEN WAY
SUITE 330
MAITLAND, FL 32751 US

**FEI Number: 20-5063990** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PEADEN, GREGORY A
201 SOUTH ORANGE AVE
STE 1030
ORLANDO, FL 32801 US

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

LUCIEN SERVICES, INC.
2200 LUCIEN WAY
SUITE 330
MAITLAND, FL 32751 US

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: RYAN TENNYSON, PRESIDENT 04/28/2009
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete
Name: CERTS INC
Address: 201 SOUTH ORANGE AVE STE 1030
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition
Name: LUCIEN SERVICES, INC.
Address: 2200 LUCIEN WAY
City-St-Zip: MAITLAND, FL 32751

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: RYAN TENNYSON, PRESIDENT PRES 04/28/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date