


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jun 03, 2005 8:00 am**  
**Secretary of State**

06-03-2005 90502 001 \*\*\*900.00

<b>DOCUMENT # M00000001244</b> 1. Entity Name HORIZON WEST PALM BEACH, LLC	
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Principal Place of Business 240 N. WASHINGTON BLVD. 7TH FLOOR SARASOTA, FL 34236	Mailing Address 240 N. WASHINGTON BLVD. 7TH FLOOR SARASOTA, FL 34236
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**30008600**



04182005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0989952	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BRANCH, DANIEL 240 N. WASHINGTON BLVD. 7TH FLOOR SARASOTA, FL 34236
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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, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KERN, MARTIN J 240 N. WASHINGTON BLVD. 7TH FLOOR SARASOTA, FL 34236
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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 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:**  **5/19/05** **(941) 925-3490**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #