

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Mar 13, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # M98000001012**

1. Entity Name  
**HORIZON TWO OF BRADENTON, LLC**



Principal Place of Business  
**240 N. WASHINGTON BLVD  
7TH FLOOR  
SARASOTA, FL 34236**

Mailing Address  
**240 N. WASHINGTON BLVD  
7TH FLOOR  
SARASOTA, FL 34236**



01112006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**65-0861079**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**BRANCH, DANIEL  
240 N. WASHINGTON BLVD.  
7TH FLOOR  
SARASOTA, FL 34236**

**DO NOT WRITE  
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, 2006**

1800000400051  
03/23/06-00030-018 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KERN, MARTY 240 N WASHINGTON BLVD SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
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 #

3/16/06 941-350-0391