

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006417

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: HORIZON ACADEMY OF BUSINESS & TECHNOLOGY, INC.

Current Principal Place of Business:

P O BOX 3254
WEST PALM BEACH, FL 334023254

New Principal Place of Business:

Current Mailing Address:

P O BOX 3254
WEST PALM BEACH, FL 334023254

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILLIGAN, ALPHONSO S
4600 E PARK DR STE 201
PALM BEACH GARDENS, FL 33410 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLIGAN, ALPHONSO
Address: 4600 E PARK DR STE 201
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: MILLIGAN, ANGEL D
Address: P O BOX 211796
City-St-Zip: ROYAL PALM BEACH, FL 334211796

Title: D () Delete
Name: COPPOCK, MARK
Address: 626 N DIXIE HWY
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALPHONSO MILLIGAN

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date