2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02688

FILED Sep 01, 2009 Secretary of State

Entity Name: NEW HORIZONS PROPERTIES II, INC.

Current Principal Place of Business: New Principal Place of Business:

4300 SW 13TH ST.

GAINESVILLE, FL 326084099

Current Mailing Address: New Mailing Address:

4300 SW 13TH ST.

GAINESVILLE, FL 326084099

FEI Number: 59-2408827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LABARTA, MARGARITA PH D. 4300 SW 13TH ST. GAINESVILLE, FL 32608

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

DEBOLT, CHARLES ALLEN, CHARLES Name: Name: 12207 NW 39TH AVE Address: P.O. BOX 140280 Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: GAINESVILLE, FL

(X) Change () Addition Title: Title: () Delete

ALLEN, CHARLES Name: CASON, LILLIAN Name:

Address: POB 140280 Address: 1621 SE GILES MARTIN AVE City-St-Zip: GAINESVILLE, FL 32614 City-St-Zip: LAKE CITY, FL 32024

Title: () Delete Title: (X) Change () Addition

HAMMOND, LUTHER BRANHAM, NADIA Name: Name: 1018 SW 25TH PLACE 4300 SW 13TH STREET Address: Address: City-St-Zip: GAINESVILLE, FL City-St-Zip: GAINESVILLE, FL 32608

Title: VΡ () Delete Title: TR (X) Change () Addition

Name: CASON, LILLIAN Name: LABARTA, MARGARITA 1621 SE GILES MARTIN AVE 4300 SW 13TH STREET Address: Address: City-St-Zip: LAKE CITY, FL 32024 City-St-Zip: GAINESVILLE, FL 32608

Title: (X) Delete Title: () Change () Addition

GREENSPAN, MARLENE Name: Name: RR 2, BOX 6783 Address: Address: City-St-Zip: FORT WHITE, FL 32038 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

LABARTA, MARGARITA Name: Name: Address: 4300 SW 13TH ST Address: GAINESVILLE, FL 32608 City-St-Zip: 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 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: MARGARITA LABARTA TR 09/01/2009

Electronic Signature of Signing Officer or Director

Date