

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009712

FILED
Mar 02, 2004
Secretary of State**Entity Name:** THE HORIZONS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2245 N BEACH ROAD
ENGLEWOOD, FL 34223**New Principal Place of Business:****Current Mailing Address:**2245 N BEACH ROAD
ENGLEWOOD, FL 34223**New Mailing Address:****FEI Number:** 20-0796466**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEWELL, DARRYL A
3579 S ACCESS ROAD SUITE L
ENGLEWOOD, FL 34224**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: DPS () Delete
Name: NEWELL, DARRYL A
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

Title: DVT () Delete
Name: HEISE, THOMAS C
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

Title: D () Delete
Name: SOISTMAN, MIKE
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: NEWELL, DARRYL A
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

Title: DIR (X) Change () Addition
Name: HEISE, THOMAS C
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

Title: DIR (X) Change () Addition
Name: SOISTMAN, MIKE
Address: 3579 S ACCESS ROAD SUITE L
City-St-Zip: ENGLEWOOD, FL 34224

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: DARRYL A NEWELL

DIR

03/02/2004

Electronic Signature of Signing Officer or Director

Date