

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05845

FILED
Jan 07, 2010
Secretary of State

Entity Name: HORIZON MOBILE HOME OWNERS, INC.

Current Principal Place of Business:

595 SUNSHINE LN
NORTH FORT MYERS, FL 33918 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3768
NORTH FORT MYERS, FL 33918 US

New Mailing Address:

FEI Number: 59-2492036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIHARY, ROBERT
595 SUNSHINE LN.
NORTH FORT MYERS, FL 33903 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: P
Name: OSSENBECK, VICKY
Address: 390 HORIZON DR
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: V
Name: ZURELL, ROGER
Address: 436 RAINBOW DR
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD
Name: BIHARY, ROBERT
Address: 595 SUNSHINE LN
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S
Name: PAUL, JUDY
Address: 356 HORIZON DR
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D
Name: GENIS, JENNIE
Address: 328 SUNSHINE AVE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D
Name: GILSON, JEAN
Address: 528 SUNSHINE AVE
City-St-Zip: NORTH FORT MYERS, FL 33903

I hereby 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 all other like empowered.

SIGNATURE: ROBERT BIHARY

TRES

01/07/2010

Electronic Signature of Signing Officer or Director

Date