

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004680

FILED
Apr 16, 2008
Secretary of State

Entity Name: HORIZON CROSSROADS GROUP HOMES, INC.

Current Principal Place of Business:

1337 W. COLONIAL DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1337 W. COLONIAL DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 30-0360803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, SHANNON KEITH
1337 W. COLONIAL DRIVE
ORLANDO, FL 32804 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: DP () Delete
Name: TURNER, SHANNON KEITH ESQUIRE
Address: 1337 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: CEO () Delete
Name: TURNER, SHANNON KEITH ESQUIRE
Address: 1337 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: DVP () Delete
Name: SMITH-MOBLEY, CYCLYN R
Address: 12739 SERENADE CIRCLE NORTH
City-St-Zip: JACKSONVILLE, FL 32225

Title: DT () Delete
Name: PARANTE, LORRAINE J
Address: 1337 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: DS () Delete
Name: BROWN, YOLANDA JEAN
Address: 1337 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: OSCAR, CLAIRE
Address: 1337 W. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: LORRAINE J. PARENTE

DT

04/16/2008

Electronic Signature of Signing Officer or Director

Date