

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24798

FILED
May 27, 2008
Secretary of State

Entity Name: HORIZON SOUTH IX, INC.

Current Principal Place of Business:

17462 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

17462 FRONT BEACH RD
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 59-3111346 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:

SLOAN, TIMOTHY J. ATTORNEY
427 MCKENZIE AVE.
PANAMA CITY, FL 32401 US

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: PD () Delete
Name: RELLINGER, MICHAEL
Address: 17462 FRONT BEACH RD BOX 168
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD () Delete
Name: BERNARD, BONNIE
Address: 1620 SAND POINT ROAD
City-St-Zip: MUNISING, MI 49862

Title: VPD () Delete
Name: PILCHER, BILL
Address: 55 WEST PINE DR.
City-St-Zip: FORTSON, GA 31808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: RELLINGER, MICHAEL
Address: 17462 FRONT BEACH RD BOX 168
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: BILL PILCHER

PD

05/27/2008

Electronic Signature of Signing Officer or Director

Date