2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24798

Entity Name: HORIZON SOUTH IX, INC.

FILED May 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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17462 FRONT BEACH RD

PANAMA CITY BEACH, FL 32413

Current Mailing Address: New Mailing Address:

17462 FRONT BEACH RD PANAMA CITY BEACH, FL 32413

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 BONNEY, GARTH D ESQ 427 MCKENZIE AVE. 436 MCKENZIE AVE.

PANAMA CITY, FL 32401 US 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: GARTH D BONNEY 05/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: RELLINGER, MICHAEL Name: YEAKEL, JIM
Address: 17462 FRONT BEACH RD BOX 168 Address: 17462 FRONT BEACH RD BOX 203
City-St-Zip: PANAMA CITY BEACH, FL 32413 City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD () Delete Title: () Change () Addition Name: BERNARD, BONNIE Name:

 Address:
 1620 SAND POINT ROAD
 Address:

 City-St-Zip:
 MUNISING, MI 49862
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 PILCHER, BILL
 Name:

 Address:
 55 WEST PINE DR.
 Address:

 City-St-Zip:
 FORTSON, GA 31808
 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 05/27/2009