2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34358

FILED Apr 30, 2007 Secretary of State

Entity Name: HORIZON SOUTH RECREATIONAL FACILITIES CORPORATION

Current Principal Place of Business: New Principal Place of Business: 17462 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413 **Current Mailing Address: New Mailing Address:** 17462 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413 FEI Number: 59-3039929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLOAN, TIMOTHY JATTORNE 427 MCKENZIE AVENUE PANAMA CITY BEACH, 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PIERSON, FRED Name: Name: 1150 CRIPPLE CREEK DRIVE Address: Address: City-St-Zip: LAWRENCEVILLE, GA 30043 City-St-Zip: Title: PD Title: PD () Delete (X) Change () Addition HUCKABY, BETTY Name: MYLES, PAT Name: Address: 635 CONGER RD. Address: 17462 FRONT BEACH ROAD BOX 404 City-St-Zip: ANNISTON, AL 36207 City-St-Zip: PANAMA CITY BEACH, FL 32413 Title: () Delete Title: (X) Change () Addition PIERSON, JIMMY TRAWICK, HERSHEL Name: Name: 599 INMAN ROAD Address: 351 MAIN ST Address: City-St-Zip: CULLODEN, GA 31006 City-St-Zip: HAMPTON, GA 30228 Title: VPD () Delete Title: VPD (X) Change () Addition Name: MEADE, HUGH Name: DEAN ANN 123 TOM MORRIS LANE 340 WINGFOOT ST BOX 606 Address: Address: City-St-Zip: ENTERPRISE, AL 36330 City-St-Zip: ROCKMART, GA 30153 Title: () Delete Title: (X) Change () Addition HARRISON, TAWANA HARRY, RON Name: Name: 17462 FRONT BEACH RD BOX 395 17462 FRONT BEACH RD BOX 395 Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32413 City-St-Zip: PANAMA CITY BEACH, FL 32413 Title: () Delete Title: (X) Change () Addition DEAN, NATHAN PIERSON, JIMMY Name: Name: Address: 340 WINGFOOT ST BOX 606 Address: 351 MAIN STREET ROCKMART, GA 30153 CULLODEN, GA 31006 City-St-Zip: 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: PAT MYLES PD 04/30/2007