2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47011

Entity Name: HORIZON SOUTH XV, 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 ROAD PANAMA CITY BEACH, FL 32413

Current Mailing Address: New Mailing Address:

17462 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413

FEI Number: 59-3111375 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:

TIMOTHY J. SLOAN

502 HARMON AVE

PANAMA CITY, FL 32401 US

BONNEY, GARTH D ESQ
436 MCKENZIE AVENUE
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: PD () Delete Title: PD (X) Change () Addition

 Name:
 BEATY, MIKE
 Name:
 MESSER, MARY

 Address:
 17462 FRONT BEACH ROAD BOX 123
 Address:
 6923 ROWAN ROAD

 City-St-Zip:
 PANAMA CITY BEACH, FL 32413 US
 City-St-Zip:
 LEEDS, AL 35094 US

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

Name: RYAN, ANN Name: RYAN, ANN

Address: 10908 S NAATCHEZ AVENUA Address: 10908 S NAATCHEZ AVENUA City-St-Zip: WORTH, IL 60482 City-St-Zip: WORTH, IL 60482

Title: STD () Delete Title: VPD (X) Change () Addition Name: MESSER, MARY Name: LAUGHLIN, BILL

Address: 1800 ROWEN RD Address: 17462 FRONT BEACH ROAD BOX 148
City-St-Zip: LEEDS, AL 35094 City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: () Delete Title: TD () Change (X) Addition

Name: Name: MILLER, GARY

Address: Address: 17462 FRONT BEACH ROAD BOX 266
City-St-Zip: City-St-Zip: PANAMA CITY BEACH, FL 32413

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: MARY MESSER PD 05/27/2009