

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47302

FILED
Apr 28, 2011
Secretary of State

Entity Name: HORIZONS OF OKALOOSA COUNTY, INC.

Current Principal Place of Business:

123 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

123 TRUXTON AVENUE
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3109969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNABB, JULIA J CEO
123 TRUXTON AVENUE
FT. WALTON BEACH, FL 32547 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: CEO
Name: MCNABB, JULIA
Address: 506 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TREA
Name: MALLINI, TONY
Address: 1054 ROXANNA ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: CFO
Name: EVANS, JANET
Address: 208 VICKI LEIGH ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D
Name: PRICHARD, KATHLEEN
Address: 249 WAKISSA COVE
City-St-Zip: DESTIN, FL 32541

Title: PRES
Name: RUSS, ROBERT W
Address: 62 MORNING SUN COURT
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP
Name: CAMPBELL, WAYNE
Address: 1000 NW MAR WALT DRIVE
City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby 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 all other like empowered.

SIGNATURE: JANET EVANS

CFO

04/28/2011

Electronic Signature of Signing Officer or Director

Date