

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000165

FILED
Jan 20, 2009
Secretary of State

Entity Name: NEW HORIZONS GROUP HOMES, INCORPORATED

Current Principal Place of Business:

109 E CLAY AVE
BRANDON, FL 35510 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 963
BRANDON, FL 33509 US

New Mailing Address:

FEI Number: 65-0372596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N HIGHLAND AVE
TAMPA, FL 33602 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: PD () Delete
Name: WATKINS, PETER F JR
Address: 3937 BUCKINGHAM LOOP DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: URAVICH, PAUL
Address: 4618 BLOOMINGDALE AVE
City-St-Zip: VALRICO, FL 335946023

Title: TD () Delete
Name: BREVIK, LANAN
Address: 4310 BROOKE DR
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: ALLEY, GARY
Address: 502 VALLEY HILL DRIVE
City-St-Zip: BRANDON, FL 33510

Title: DS () Delete
Name: WATKINS, BRENDA
Address: 3937 BUCKINGHAM LOOP DR
City-St-Zip: VALRICO, FL 33594

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STONER, STEVE
Address: 256 HEATHERBROOKE CIRCLE
City-St-Zip: OVIEDO, FL 32675

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: VIERA, LUIS
Address: 5157 STERLING MANOR DRIVE
City-St-Zip: TAMPA, FL 33647

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: PETER F WATKINS JR.

PD

01/20/2009

Electronic Signature of Signing Officer or Director

Date