

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2006  
Secretary of State**

DOCUMENT# N93000000001

Entity Name: HORIZON SOUTH XVI, INC.

**Current Principal Place of Business:**

17462 FRONT BCH ROAD  
PANAMA CITY BEACH, FL 32413 US

**New Principal Place of Business:**

**Current Mailing Address:**

17462 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32413 US

**New Mailing Address:**

FEI Number: 59-3203886      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SLOAN, TIMOTHY J  
427 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 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: VPD ( ) Delete  
Name: SIMPSON, MEL  
Address: 17462 FRONT BEACH RD BOX 271  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: PD ( ) Delete  
Name: DIERKES, EVA  
Address: 17462 FRONT BEACH RD. BOX 346  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD ( ) Delete  
Name: LEE, MARVIN  
Address: 17462 FRONT BEACH ROAD BOX 275  
City-St-Zip: PANAMA CITY BEACH, FL 32413

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: EVA DIERKES

PD

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date