2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004444

Entity Name: HORIZON WEST, INC.

FILED Jan 05, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

141 TERRA MANGO LOOP ORLANDO, FL 32835

Current Mailing Address: New Mailing Address:

141 TERRA MANGO LOOP
ORLANDO, FL 32835

141 TERRA MANGO LOOP
SUITE B
ORLANDO, FL 32835 US

FEI Number: 59-3204674 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:

PHILLIPS, DON

141 TERRN MANGO LOOP

ORLANDO, FL 32835 US

PHILLIPS, DON

141 TERRA MANGO LOOP

SUITE B

ORLANDO, FL 32835 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: DON PHILLIPS 01/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition ARDAMAN, KURT A Name: Name: 1947 LEE ROAD Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: PHILLIPS, DON Name: Address: 141 TERRA MANGO LOOP, SUITE B Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: () Delete Title: (X) Change () Addition JUNE, RANDY Name: JUNE, RANDY Name: 232 S DILLARD ST STE 232 132 W PLANT ST Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787

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

 Name:
 KARR, JIM
 Name:

 Address:
 527 MAIN ST.
 Address:

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BURCH, BILLY
 Name:

 Address:
 905 W. STORY RD.
 Address:

 City-St-Zip:
 WINTER GARDEN, FL 34787
 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: DON PHILLIPS PRES 01/05/2009