

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000070

FILED
Jan 21, 2011
Secretary of State

Entity Name: NEW HORIZONS PROPERTIES IV, INC.

Current Principal Place of Business:

4300 SW 13TH STREET
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

PO BOX 141750
GAINESVILLE, FL 32614

New Mailing Address:

FEI Number: 59-3366439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LABARTA, MARGARITA PHD
4300 SW 13TH STREET
GAINESVILLE, FL 32608 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: P
Name: ALLEN, CHARLES
Address: P.O. BOX 140280
City-St-Zip: GAINESVILLE, FL 32614

Title: D
Name: BRANHAM, NADIA
Address: 4300 SW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: TR
Name: LABARTA, MARGARITA
Address: 4300 SW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: VP
Name: CASON, LILLIAN
Address: 1621 SE GILES MARTIN AVE
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: WARNOCK, PATRICIA
Address: 4300 SW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: DEBOLT, CHARLES
Address: 4300 SW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

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: MARGARITA LABARTA, PHD

TR

01/21/2011

Electronic Signature of Signing Officer or Director

Date