

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003247

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** HORTON PLACE OWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

310 COLLEGE DRIVE  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

**Current Mailing Address:**

310 COLLEGE DRIVE  
ORANGE PARK, FL 32065

**New Mailing Address:**

**FEI Number:** 59-3518465

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINTON, JAMES E  
310 COLLEGE RD  
ORANGE PARK, FL 32065 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: D ( ) Delete  
Name: LINTON, JAMES E  
Address: 923 AUTHOR MOORE DR.  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D ( ) Delete  
Name: WARD, KEITH R  
Address: 2741 NAVAJO RD  
City-St-Zip: ORANGE PARK, FL 32065

Title: D ( ) Delete  
Name: MAY, SHARON L  
Address: 5591 DIANTHUS ST  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

**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 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: KEITH R. WARD

P

01/14/2009

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

\_\_\_\_\_  
Date