

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N9800004104**



1. Entity Name

**HORTONS LANDING ADDITION SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business

840 LAKE JUNE ROAD  
LAKE PLACID FL 33852

Mailing Address

840 LAKE JUNE ROAD  
LAKE PLACID FL 33852

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0908502**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**BELLINGER, FRED C. E.**  
840 LAKE JUNE ROAD  
LAKE PLACID FL 33852

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

**2/16/03**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE **DP**  
NAME **MESSANA, JOE**  
STREET ADDRESS **859 LAKE JUNE ROAD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

Delete

TITLE **DST**  
NAME **BELLINGER, C E**  
STREET ADDRESS **840 LAKE JUNE ROAD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

Delete

TITLE **DV**  
NAME **ROSS, WAYNE**  
STREET ADDRESS **879 LAKE JUNE ROAD**  
CITY-ST-ZIP **LAKE PLACID FL 33852**

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

**11.**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

**DP** **FRED KLINGLER**  Change  Addition  
**811 LAKE JUNE RD,**  
**LAKE PLACID, FL. 33852**

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.

SIGNATURE: *Joe C. Bellinger*

See Tres. 2/16/03 863-465-8144

Page 1 of 1