

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006173

FILED
Mar 31, 2009
Secretary of State

Entity Name: HORIZON FOUNDATION, INC.

Current Principal Place of Business:

12800 UNIVERSITY DR
SUITE 300
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12800 UNIVERSITY DR
SUITE 300
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0317286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNELL, MARY V
1833 HENDRY STREET
FORT MYERS, FL 33901 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: PD () Delete
Name: ROEPSTORFF, ROBBIE
Address: 13000 S. CLEVELAND AVE
City-St-Zip: FORT MYERS, FL 33907

Title: TD () Delete
Name: TRIPPE, GARY V
Address: 13575 BELL TOWER DR
City-St-Zip: FORT MYERS, FL 339066139

Title: VP () Delete
Name: WIEST, JOHN
Address: 636 DEL PRADO BLVD.
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Delete
Name: SCHROEDER, BILL
Address: 13099 SOUTH CLEVELAND AVE., STE 200
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUDLER, CAROL
Address: 2442 DR. MARTIN LUTHER KING BLVD
City-St-Zip: FORT MYERS, FL 33901

Title: TD (X) Change () Addition
Name: KIRKWOOD, WAYNE
Address: 1018 S.E. 12TH CT.
City-St-Zip: CAPE CORAL, FL 33915

Title: VP (X) Change () Addition
Name: SCHROEDER, BILL
Address: 13099 SOUTH CLEVELAND AVE., STE 200.
City-St-Zip: FORT MYERS, FL 33907

Title: SD (X) Change () Addition
Name: GREEN, KATHERINE
Address: 9990 COCONUT RD., #200
City-St-Zip: BONITA SPRINGS, FL 34135

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: CAROL HUDLER

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date