2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000105283 1. Entity Name

R W HORTON ENTERPRISES INC.

Principal Place of Business 1265 19TH AV SW VERO BEACH, FL 32962 Mailling Address PO BOX 650676 VERO BCH, FL 32965-0676

FILED Apr 19, 2007 08:00 Al Secretary of State



CR2E034 (11/05)

Applied For

\$8.75 Additional

Fee Required

Not Applicable

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HORTON, RALPH W 1265 19TH AVE SW VERO BCH, FL 32962

DO NOT WRITE IN THIS SPACE

No Chg-P

04142007

4. FEI Number 65-0884717

5. Certificate of Status Desired

 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	f applicable. (NOTE: Registere	d Agent signature	required when remetating)	DATE	·,
	E NOW!!! FEE 18 \$150.00 ay 1, 2007 Fee will be \$550.00	 Election Campaign Final Trust Fund Contribution. 	icing	\$5.00 May Be Added to Fees		•
10.	OFFICERS AND DIREC	CTORS		· · · · · · · · · · · · · · · · · · ·		
TITLE	PCEO					{
NUME	HORTON, RALPH W					
STREET ADDRESS	1265 19TH AVE SW					
CITY-ST-ZP	VERO BCH, FL 32962				U00000710505	
TITLE			1		U00000716535	
NAME					04/30/07-80012-005 15	50.PC
STREET ADDRESS						
CITY-ST-7P						
TITLE						
NAME			1			
STREET ADDRESS						1
CITY-ST-ZP				00	NOT WRITE	
TILE			1	INF '	THIS SPACE	
NAME				LIN	I HIS SPACE	1
STREET ADDRESS						
CITY-ST-ZP						
TILE	······································	·····				1
NAME						
STREET ADDRESS						
CITY-ST-ZP						
TITLE			1		• • •	
NAME			l			l l
STREET ADDRESS						
_CITY-ST-ZIP						
of the cor	certify that the information supplied with this f on this report or supplemental report is true a poration or the receiver or trustee empowere , or on an attachment with an address, with al	d to execute this report as requi	emptions co ture shall ha red by Chap	ntained in Chapter 11 We the same legal effe ter 607, Florida Statut	 Porida Statutes. I further certify that the informatik ct as if made under oath; that I am an officer or direct es; and that my name appears in Block 10 or Block 1 	DA ator (L1 if
SIGNAT			TOR	4/16	100 102-500-0845 Data Dityona #	-
						J