

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000007060

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** HORIZON PROMOTIONAL PRODUCTS, INC.

**Current Principal Place of Business:**

9612 SUNBEAM CENTER DRIVE  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

9612 SUNBEAM CENTER DRIVE  
SUITE 101  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

9612 SUNBEAM CENTER DRIVE  
JACKSONVILLE, FL 32257 US

**FEI Number:** 61-1402236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUFRESNE, DONALD M ESQ  
PARKER & DUFRESNE, P.A.  
8777 SAN JOSE BLVD., STE. 301  
JACKSONVILLE, FL 32217 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:** DPT  
**Name:** CHAPPELL, DAVID A  
**Address:** 405 E. WOODHAVEN DR.  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** VS  
**Name:** CHAPPELL, CARMEN  
**Address:** 405 E WOODHAVEN DR  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DAVID CHAPPELL

OWNE

01/05/2012

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

\_\_\_\_\_  
Date