

PA5000083427

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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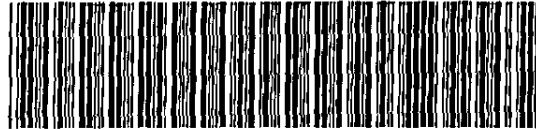
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. A. Charge
LTS
6-23-05

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HORIZON UTILITIES, INC.
(Name of corporation)

DOCUMENT NUMBER: P05000083427

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

REBECCA TAYLOR
(Name of contact person)

BUSINESS SUPPORT INC.
(Firm/Company)

417 STOWE AVE SUITE 2
(Address)

ORANGE PARK, FL 32073
(City/state and zip code)

For further information concerning this matter, please call:

REBECCA TAYLOR at (904) 264-1289
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
_____ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: HORIZON UTILITIES, INC.
2. The principal office address: 5536 SHAD ROAD, JACKSONVILLE, FL 32267
3. The mailing address (if different): 234 LIGE BRANCH LANE, JACKSONVILLE, FL 32259

4. Date of incorporation/qualification: 6/9/05 Document number: P05000083427

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

JIMMY L SETZER JR

234 LIGE BRANCH LANE

JACKSONVILLE, FL 32259

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

BUSINESS SUPPORT INC. - LISA COGAN

417 STOWE AVE SUITE 2

(P.O. Box NOT acceptable)

ORANGE PARK, FL 32073

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.


(Signature of officer or director)

Jimmy Setzer Jr.
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete performance
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.*

Lisa B. Cogan
(Signature of Registered Agent)

6-16-05
(Date)

If signing on behalf of an entity:

BUSINESS SUPPORT INC.
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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