STREET ADDRESS

14. I hereby certify that the information

indicated on this annual rel

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 17 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name (9)P37235 HORIZON CONSTRUCTION COMPANY Mailing Address Principal Place of Business 5020 OLD ELLIS POINTE **5020 OLD ELLIS POINTE** SUITE 100 SUITE 100 DO NOT WRITE IN THIS SPACE ROSWELL GA 30076 **ROSWELL GA 30076** 3. Date Incorporated or Qualified 01/21/1992 2. Principal Place of Business 2a. Mailing Address Applied For 58-1939516 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HEFFELMIZE, TIMOTHY LEE 9565 JOEL DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) SEMINOLE FL 34647 83 64 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) CR2E034 (10/97) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE MICHAM, STEPHEN D. NAME 1.2 NAME **5004 HICKORY HILL DR** STREET ADDRESS 1.3 STREET ADDRESS WOODSTOCK GA CITY-ST-7IP 1.4 CiTY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE WHITE, WADE J. NAME 2.2 NAME 1880 KILOUGH CHURCH RD STREET ADDRESS 2.3 STREET ADDRESS DAWSONVILLE GA CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MICHAM, STEPHEN D. 3.2 NAME NAME **5004 HICKORY HILL DR** STREET ADDRESS 3.3 STREET ADDRESS **WOODSTOCK GA** CITY-S1-ZIP 3 4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

64 CITY-ST-ZIP