

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 OCT 21 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 1. Corporation Name
Horton Group, Inc.
P95000043130

Principal Place of Business Mailing Address
931 Village Blvd. Suite 905-350
West Palm Beach, FL 33409

2. Principal Place of Business 2a. Mailing Address
21 N/A 26 N/A
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 905-350 27
City & State City & State
23 West Palm Beach, FL 28 FL
Zip Country Zip Country
24 33409 25 29 30

3. Date Incorporated or Qualified 3a. Date of Last Report
6/21/1995 6/21/1995
4. FEI Number Applied For
65-0608187 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Michael G. Horton
82 Street Address (P.O. Box Number is Not Acceptable)
931 Village Blvd.
83 Suite 905-350
84 City West Palm Beach FL 85 Zip Code 33409

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

N/A
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME President
STREET ADDRESS Michael G. Horton
CITY-ST-ZIP 931 Village Blvd., Suite 905-350
W.P.B. FL 33409
TITLE ☐ DELETE
NAME Treasurer
STREET ADDRESS Michael G. Horton
CITY-ST-ZIP 931 Village Blvd., Suite 905-350
W.P.B. FL 33409
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
800001987528--7
-10/28/96--01063--029
****250.00 ****250.00
960-23-90

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael G. Horton
Signature, typed or printed name of signing officer or director

July 19, 1996
Date

Telephone # (561) 640-3

CR2E034 (3/96)



HORTON
GROUP
INC.

APPRAISERS

CONSULTANTS

October 9, 1996

Division of Corporation
Annual Reports Section
Post Office Box 13900
Tallahassee, Florida 32317

Dear Shawn:

Following up on my conversation with the Department Manager Shawn, I am writing my explanation on my annual report. I submitted my annual report with the \$250 annual fee July 19, 1996. The annual report application was return because I didn't fill out Block 12. It states in block letters, Please do not make any marks in block 12 unless deleting in officer, corrections or additions are to be made Block 13.

I found that paragraph is very misleading. This is my first annual report, the form did not, I believe, explain that I have to put an officer in that block. Your department sent the application back to me for correction. I should have opened the return letter right away, for now on I will do so for any letters from the state. However, I feel it is unfair to charge me an extra \$170 for reinstatement form. I filled out all the red items in the application and I carefully read all the instructions. The extra \$170 my not seem a lot but to me right now it is, and it is the principle involved in that the form was I believe misleading. I had every intention of doing it right and proper from the start. Please process the annual report with my original annual report application with original check of \$250.

I filled out Block 12, hopefully correct this time. Should you any questions or problems, please contact me at your convenience.

Sincerely,

Michael G. Horton, President