FILED

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90151 009 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000048733

1. Corporation Name

Principal Place of Business

HORIZON HOMES, INC.

265 S. FEDERAL HWY., STE. 270 265 S. FEDERAL HWY.. STE. 270 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 DO NOT WRITE IN THIS SPACE 3. Date ir corporated or Qualifed 06/22/1995 2. Principa Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0592646 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Recuired 22 27 City & State City & State 6. Electio 1 Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Ζiρ Country Zip 8. This corporation owes the current year Intangible [ Yes Personal Property Tax. 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PLATERO, ERIC P Street Address (P.O. Box Number is Not Acceptable) 82 265 SO. FEDERAL HWY **STE 270** 83 **DEERFIELD BEACH FL 33441** 84 City 85 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 circutors. I hereby accept the appointment as registered agent. am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition **PSTD** ☐ DELETE 1.1 TITLE TITLE PLATERO, ERIC P 1 2 NAME NAME 265 S. FEDERAL HWY., STE. 270 1.3 STREET ADDRESS STREET ADDRESS **DEERFIELD BEACH FL 33441** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRE 35 34 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 41 TITLE 4 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

(NOTI:: Registered Agent signature required when reinstating)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is truly 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 of trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, pron an attachment with an address, with a lother like empowered.

SIGNATURE: \_

CITY-ST-ZIF

SIGNATURE AND TYPED OR FRINTED NAI

Date

Davtime Phone #

CR2E034 (11/98)

INo