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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000077749 (5)

ON THE HORIZON INC.

Princi	pai Place	of Busines	S

FILED Mar 18 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address			n imbringer tile köttik astats odatti editis odatti tebris tebris tebris tebris tebris tebris sadat					
4510 S. LAKE (ORLANDO FL 3	DRLANDO PARKWAY 2808	4510 S. LAKE C ORLANDO FL 32		RKWAY						
						3. Date incorporated or Qualified 09/17/1996	3a. Da	te of Last Fi	teport	
2. Principal Place of Business		2a. Mailing Add	2a. Mailing Address			4. FET Number		Ar	pplied For	
21		26	26			59-3348697 Not Applicab				_
Sulte, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Žφ			'	8. This corporation has liability for intangible tax under s. 199.032				
24	25	29	30		Horida Statutes Yes No					
	9. Name and Address of Curre	nt Registered Agent			,	10. Name and Address of New Re	gistered A	gent		
4510	GERALD, DONALD W S. LAKE ORLANDO PARKWAY ANDO FL 32808	•		81 82 83 84	Name Street Add	dress (F.O. Box Number is Not Acceptat	FL	85 Zip	Code	
agent. La	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Flor e of Florida. Such cha gations of, Section 60	ida Statules inge was auf 7.0505, Florid	, the above thorized by da Statutos	o-named co the corpor s.	rporation submits this statement for the patients board of directors. I hereby accept		changing it changing it ointment as	ts registered registered	
SIGNATURE	Signature, typed or punted name of registered ag	ent and tile if applicable	(NOTE #	tegistered Age	ent signature req	urred when rehistating)	DAH			
12.	OFFICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOF	RS IN 12	(6
TALE	D] []){	1.1 TITLE	1			Change	Addition	Įş
NAME .	FITZGERALD, DONALD			1.2 NAME						2
STREET ADDRESS	4510 S. LAKE ORLANDO PAR	KWAY		1,3 STREET	ADDRESS					[5
CITY-ST-ZIP	ORLANDO FL 32808			1,4 COY - S	1-21P					Š
TITLE		7	FLE IE	211014				Change	Addition	70
NAME				2.2 NAME						
STREET ADDRESS				2.3 S1REI 1	ADORESS					
CITY-ST-ZIP				2 4 CHY-5	S1 - 7IP					
TITLE		1	ELE 1E	3 1 1171. F				Change	Addition	1
NAME				3.2 NAME	Ì					1
STREET ADDRESS				3.3 STREET	ADDRESS					
CITY-ST-ZIP				3.4. CITY - 5						
TITLE			OÉLETE	4.1 HILE				Change	Addition	1
NAME I		-		4. 2 NAME				•		-
STREET ADDRESS				4.3 STREET	ADDRESS					1
CITY-ST-ZIP				4.4 CHY-S						
TITLE		······································	ELETE	51 101F				Change	Addition	-
NAME		L. J \		5.2 NAME						Ì
STREET ADDRESS				5.3 STREET	Annorce					
CITY-ST-ZIP TITLE			DECETE	5.4 CHY-S 6.1 TITLE				Change	Addition	+
		L] L	AE C I I E	1			1	vange	LJ AGURIÓN	
NAME				6.2 NAME						
STREET ADORESS				6.3 \$TREFT						
CITY-ST-ZIP	w cortify that the information surveyly	ad with this filling door	not qualify	6.4 CITY-S		ed in Section 119.07(3)(i). Florida Statute	e I fuilbor	cortify that	the	-
17. IUU 110166	A COLUIN THAT THE ITHORITION SUPPRIN	activing three united QOCS	FICA GUAIIIV	IOI DIE GAG	CIRTIES AND STATE	III GEGUOH [12.0113][H. 110][DA ƏKILÜK	o. i turtilli	COMMON THAT	LU ISA	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 33 if changed, or on an attachment with an address.

3-1-87