

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90017 025 ***150.00

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1. Entity Name
HTC INVESTMENTS, INC.



Principal Place of Business
4641 RYALS ROAD
ZEPHYRHILLS, FL 33541

Mailing Address
4641 RYALS ROAD
ZEPHYRHILLS, FL 33541



03202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3526834

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HORN, JOYCE M
4641 RYALS ROAD
ZEPHYRHILLS, FL 33541

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME HORN, FREDDIE D
STREET ADDRESS 4641 RYALS ROAD
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE D
NAME COOK, DAN
STREET ADDRESS 7840 POND'S EDGE LANE
CITY-ST-ZIP ZEPHYRHILLS, FL 33540

TITLE DV
NAME TIMMONS, EDWARD R
STREET ADDRESS 36550 EILAND BLVD.
CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE P
NAME COOK, NANCY D
STREET ADDRESS 7840 POND'S EDGE LANE
CITY-ST-ZIP ZEPHYRHILLS, FL 33540

TITLE ST
NAME HORN, JOYCE M
STREET ADDRESS 4641 RYALS ROAD
CITY-ST-ZIP ZEPHYRHILLS, 33 541

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joyce M. Horn

Date

813 782-8200

Daytime Phone #