

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000067141

1. Entity Name
HTC INVESTMENTS, INC.



Principal Place of Business
**4641 RYALS ROAD
ZEPHYRHILLS, FL 33541**

Mailing Address
**4641 RYALS ROAD
ZEPHYRHILLS, FL 33541**



02152007 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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
HORN, JOYCE M
4641 RYALS ROAD
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000666137
03/23/07-80058-017 150.00

**DO NOT WRITE
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

Date

Daytime Phone #

Joyce M Horn 3-12-07 8137828200