

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000105705

**Entity Name:** HORRELL BUILDERS, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

170 MALLEY COVE LANE  
FLEMING ISLAND, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

170 MALLEY COVE LANE  
FLEMING ISLAND, FL 32003

**New Mailing Address:**

**FEI Number:** 59-3547894

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HORRELL, ALAN T  
170 MALLEY COVE LANE  
FLEMING ISLAND, FL 32003 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: HORRELL, ALAN T  
Address: 170 MALLEY COVE LANE  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: VP  
Name: HORRELL, PHILLIP L  
Address: 7394 HAWKS CLIFF DR WEST  
City-St-Zip: JACKSONVILLE, FL 32222

Title: VP  
Name: SIMMONS, ROBERT D  
Address: 6564 BRANDEMERE RD NORTH  
City-St-Zip: JACKSONVILLE, FL 32211

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALAN T. HORRELL

DPTS

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date