

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90102 013 ***150.00

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1. Entity Name
WILLIS & HORNE INVESTMENTS, INC.



Principal Place of Business

% NATHAN A. HORNE
3002 107TH STREET EAST
PALMETTO, FL 34221

Mailing Address

% NATHAN A. HORNE
3002 107TH STREET EAST
PALMETTO, FL 34221

44029638

2. Principal Place of Business

P.O. Box 103

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 103

Suite, Apt. #, etc.

01222004

Chg-P

CR2E034 (10/03)

City & State

PARRISH, FL

City & State

PARRISH, FL

4. FEI Number

65-0572272

Applied For

Not Applicable

Zip

34219

Country

MANATEE

Zip

34219

Country

MANATEE

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required.**

6. Name and Address of Current Registered Agent

HORNE, NATHAN A
3002 107TH STREET EAST
PALMETTO, FL 34221

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2004 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
DP
HORNE, NATHAN N
3002 107TH STREET EAST
PALMETTO, FL 34221 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVST
WILLIS, DAVID
10120 28TH AVENUE EAST
PALMETTO, FL 34221 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**P.O. Box 233
PARRISH, FL 34219**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
**10126 28TH AVE E
PALMETTO, FL 34221**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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 #

4/16/04