

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V11282

(3)

1. Corporation Name

HORTON & COMPANY, INC.

Principal Place of Business

**3421 SAN JOSE ST.
SUITE 218
TAMPA FL 33629
US**

Mailing Address

**P.O. BOX 10537
TAMPA FL 33679**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/29/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

58-3102332

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21 3421 San Jose St

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23 TAMPA FL 33629

City & State

28

Zip

24 33629

Country

25 US

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**HORTON, LEE
3421 SAN JOSE ST.
SUITE 218
TAMPA FL 33629**

10. Name and Address of New Registered Agent

81 Name

HORTON, LEE

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

3421 San Jose

83

84 City

TAMPA

FL

85 Zip Code

33629

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	HORTON, LEE
STREET ADDRESS	3421 SAN JOSE
CITY - ST - ZIP	TAMPA FL
TITLE	V
NAME	HORTON, BOB
STREET ADDRESS	3421 SAN JOSE
CITY - ST - ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	3421 San Jose St.
1.4 CITY - ST - ZIP	TAMPA, FL 33629
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	3421 San Jose St.
2.4 CITY - ST - ZIP	TAMPA, FL 33629
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Lee Horton **LEE HORTON**

4/25/95

813 8393292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number