FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
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DIVISION OF CORPORATIONS
95 MAR 28 PM 3:27

DOCUMENT # V33157 (1)

1. Corporation Name
HORIZON EXCURSIONS, INCORPORATED

Principal Place of Business	Mailing Address
231 CAPRI BLVD. ISLES OF CAPRI FL 33962 US	2086 SEVILLA WAY NAPLES FL 33942 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/30/1992
3a. Date of Last Report: 06/15/1994

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: ~~54-1816520~~ GS-033707 — 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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WAGNER, DONALD M.
669 ST. ANDREWS BLVD.
NAPLES FL 33962

10. Name and Address of New Registered Agent

81 Name: WAGNER DONALD C.
82 Street Address (P.O. Box Number is Not Acceptable): 2086 SEVILLE WAY
83:
84 City: NAPLES FL — FL — 85 Zip Code: 33942

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: Donald C Wagner — DONALD C. WAGNER — 22 MARCH 95
Signature, Typed or printed name of registered agent and title, if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PS	11 TITLE	PS	☒ Change ☐ Addition
NAME	WAGNER, DONALD M.	12 NAME	WAGNER, DONALD C	
STREET ADDRESS	2086 SEVILLA WAY	13 STREET ADDRESS	2086 SEVILLE WAY	
CITY ST ZIP	NAPLES FL	14 CITY ST ZIP	NAPLES FL	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	WAGNER, DONALD M.	22 NAME		
STREET ADDRESS	2086 SEVILLA WAY	23 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	24 CITY ST ZIP		
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	WAGNER, ROSE V.	32 NAME		
STREET ADDRESS	2086 SEVILLA WAY	33 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 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 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or reinstatement 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: Donald C Wagner — 22 MARCH 95 — (305) 7801124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0328045 CP