

Contact Information

Kansas Secretary of State
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KANSAS SECRETARY OF STATE
Not for Profit Corporation Annual Report

NP

All information must be completed or this document will not be accepted for filing.

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Corporation Name: Horizon Housing Foundation

Mailing Address: 17 W. Lockwood
Street Address

St. Louis Missouri 63119
City State Zip

Corporation ID No.: 74-2979359

1. Tax Closing Date: March 31 2002
Month Day Year

2. Due Date: _____
Month Day Year

3. State of Incorporation: Kansas

4. Officers:	Name	Residential Address	City	State	Zip	Director Y/N
Pres.	Kathleen S. Romis	17 West Lockwood	St. Louis	Missouri	63119	Y
Sec.	Alice Dante-Fletcher	1515 Westford	St. Louis	Missouri	63119	Y
Treas.	John Romis	17 West Lockwood	St. Louis	Missouri	63119	Y

5. Board of Directors:	Name (if not listed above)	Residential Address	City	State	Zip
	- SAME AS ABOVE -				

Please answer either 6 or 7 N/A is not acceptable. Please use 0 instead.

6. Number of Shares Issued	\$ Total Amount of Stock Paid Up
- 0 -	\$ - 0 -
	\$
	\$

7. Number of Members: N/A - 0 -

8. Federal Employer Identification Number: 74-2979359

9. Telephone No.: (314) 968-2205 Ext. 148

10. Does the corporation own or lease land in Kansas that is suitable for use in agriculture?

YES _____ Complete the section below. NO

This question does not apply to: 1) Tracts of land of fewer than 10 acres; 2) Contiguous tracts of land that in the aggregate are fewer than 10 acres; 3) State-assessed railroad operating property.

		Value	Where Located
Within Kansas	Agricultural	\$	
	Nonagricultural	\$	
Outside Kansas	Agricultural	\$	
	Nonagricultural	\$	

a. Provide information on each lot, tract or parcel of agricultural land in Kansas that is owned or leased by the corporation. If extra space is needed, attach additional pages.

Location of tract or lot					Was this tract acquired after July 1, 1981?		Purpose for which land is owned or leased	Indicate for each tract or parcel if the tract is ...			
County	Section	Township	Range	Number of acres in tract or lot	Yes	No		OWNED BY the corporation	LEASED TO the corporation	LEASED BY the corporation	If leased by the corporation, indicate to whom leased

b. Provide total agricultural acres for:

1. Total acres owned and operated
2. Total acres owned and operated *and* irrigated
3. Total acres leased *by* the corporation
4. Total acres leased *by* the corporation *and* irrigated
5. Total acres leased *to* the corporation
6. Total acres leased *to* the corporation *and* irrigated

I declare under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

Executed on the 5th of September, 2002
Day Month Year

Authorized Signature

Alice Drake-Fletcher

Name of Signer (printed or typed)

Secretary / Director

Title/Position