

1.) CORPORATION NAME:

**Horizon Distributors, Inc.**

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1885575**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	1,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 109 NORTH PARK BLVD.

CITY/ST/ZIP: COVINGTON, LA 70433

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: JAMES W. ROSS TITLE: PRESIDENT ADDRESS: 19 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MARK W. JOSLIN TITLE: VP &amp; TREAS ADDRESS: 109 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MANUEL J. PEREZ DE LA MESA TITLE: VICE PRESIDENT ADDRESS: 109 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: STEPHEN C. NELSON TITLE: VICE PRESIDENT ADDRESS: 109 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: TERRY SPETH TITLE: ASST. TREAS. ADDRESS: 109 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MELANIE HOUSEY TITLE: CAO ADDRESS: 109 NORTH PARK BLVD. CITY/ST/ZIP/CO: COVINGTON, LA 70433</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	JENNIFER M NEIL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	109 NORTH PARK BLVD.		
CITY/ST/ZIP/CO:	COVINGTON, LA 70433		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JENNIFER M NEIL	JENNIFER M NEIL, SECRETARY	12/3/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.