

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128302

FILED  
Jul 14, 2004  
Secretary of State

Entity Name: HORIZON MEDICAL STAFFING, INC.

## Current Principal Place of Business:

2901 W. BUSCH BLVD., SUITE 406  
TAMPA, FL 33618 US

## New Principal Place of Business:

## Current Mailing Address:

2901 W. BUSCH BLVD., SUITE 406  
TAMPA, FL 33618 US

## New Mailing Address:

FEI Number: 56-2302857

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAGGETT, KARI A  
13607 PLATTE CREEK CIRCLE  
#3  
TAMPA, FL 33613 US

## Name and Address of New Registered Agent:

DAGGETT, KARI A  
14616 N. 43RD STREET  
TAMPA, FL 33613 US

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.

SIGNATURE:

07/14/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: COO (X) Delete  
Name: AMERSON, ROSS D  
Address: 4412 TRILBY AVENUE  
City-St-Zip: TAMPA, FL 33616

Title: CEO ( ) Delete  
Name: DAGGETT, KARI A  
Address: 13607 PLATTE CREEK CIRCLE #3  
City-St-Zip: TAMPA, FL 33613

Title: P ( ) Delete  
Name: WRIGHT, DWAYNE A  
Address: 5313 ARCHSTONE DR. APT.206  
City-St-Zip: TAMPA, FL 33634

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: DAGGETT, KARI A  
Address: 14616 N. 43RD STREET  
City-St-Zip: TAMPA, FL 33613

Title: CEO (X) Change ( ) Addition  
Name: WRIGHT, DWAYNE A  
Address: 5313 ARCHSTONE DR. APT.206  
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DWAYNE A. WRIGHT

CEO

07/14/2004

Electronic Signature of Signing Officer or Director

Date