2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006
Secretary of State

DOCUMENT# 503687

Entity Name: FUTURE HORIZONS, INC.

Current Principal Place of Business:

403 N. FIRST STREET
HASTINGS, FL 32145 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1115
HASTINGS, FL 32145 US

New Mailing Address:

FEI Number: 59-1672451 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLACKBURN, ROBERT D.
125 OLD SPANISH BLUFF ROAD
E PALATKA, FL 32131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	BLACKBURN, ROBERT D	
Address:	125 OLD SPANISH BLUFF ROAD	
City-St-Zip:	E PALATKA, FL 32131	
Title:	VP	( ) Delete
Name:	BLACKBURN, RICHARD A	
Address:	113 RIVERSIDE BLVD.	
City-St-Zip:	E PALATKA, FL 32131	
Title:	ST	( ) Delete
Name:	DAVIDSON, DEBBIE R	
Address:	133 OLEANDER DRIVE	
City-St-Zip:	SAN MATEO, FL 32187	
Title:	VP	( ) Delete
Name:	BLACKBURN, ROBERT D JR	
Address:	10215 ALLAMANDA BOULEVARD	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DEBBIE R DAVIDSON ST 01/13/2006

Electronic Signature of Signing Officer or Director — Date