

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96424

FILED  
May 06, 2007  
Secretary of State

Entity Name: UNLIMITED INVESTIGATION, INC.

**Current Principal Place of Business:**

P.O. BOX 530067  
ST. PETERSBURG, FL 33747

**New Principal Place of Business:**

530067  
ST. PETERSBURG, FL 33747

**Current Mailing Address:**

P.O. BOX 530067  
ST. PETERSBURG, FL 33747

**New Mailing Address:**

FEI Number: 35-2208229      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOYDSTUN, C. BRYANT  
100 SECOND AVENUE SOUTH  
7TH FLOOR  
ST PETERSBURG, FL 33701 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

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: P ( ) Delete  
Name: OSTMAN, RAYMOND E  
Address: P.O. BOX 530067  
City-St-Zip: ST. PETERSBURG, FL 33747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify 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: RAY OSTMAN

PRES

05/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date