

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H27854

FILED  
May 01, 2009  
Secretary of State

Entity Name: SECURE HORIZON, INC.

**Current Principal Place of Business:**

1205 HILLSBORO MILE  
#102  
POMPANO BEACH, FL 33062 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8218  
JACKSONVILLE, FL 322398218 US

**New Mailing Address:**

FEI Number: 59-2470194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARDIN, DAVID C.  
500 E BROWARD BLVD #1950  
FORT LAUDERDALE, FL 33394 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: PD ( ) Delete  
Name: DAVIS, CHARLES SR  
Address: 1205 HILLSBORO MILE  
City-St-Zip: HILLSBORO BEACH, FL

Title: TD ( ) Delete  
Name: DAVIS, CHARLES J  
Address: 6750 EPPING FOREST WAY N.  
City-St-Zip: JACKSONVILLE, FL

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

Title: PD (X) Change ( ) Addition  
Name: DAVIS, CHARLES SR  
Address: 1205 HILLSBORO MILE  
City-St-Zip: HILLSBORO BEACH, FL 33062 US

Title: TD (X) Change ( ) Addition  
Name: DAVIS, CHARLES JR  
Address: 6750 EPPING FOREST WAY N.  
City-St-Zip: JACKSONVILLE, FL 32217 US

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: CHARLES DAVIS, JR

TD

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date