

FILED
Mar 08, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # J06120 1. Entity Name HORST, INC.		
Principal Place of Business 8865 THUNDERBIRD DR. PENSACOLA, FL 32514-5662	Mailing Address 8865 THUNDERBIRD DR. PENSACOLA, FL 32514-5662	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent RUESENBERG, HORST H. 8865 THUNDERBIRD DR. PENSACOLA, FL 32504		4. FEI Number 50-2853871 Applied For Not Applicable
5. 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. I am familiar with, and accept the obligations of registered agent.		3. Certificate of Status Desired ☐ \$0.75 Additional Fee Required
SIGNATURE _____ (Signature, typed or printed name of registered agent and state if applicable)		DATE _____
FILE NOW!!! FEB 18 \$150.00 After May 1, 2006 Fee will be \$350.00		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RUESENBERG, HORST H. 8865 THUNDERBIRD DR. PENSACOLA, FL	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S RUESENBERG, CATHARINA 8865 THUNDERBIRD DR. PENSACOLA, FL	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.		
SIGNATURE: <u><i>P. Ruesenberg</i></u> SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: <u>3/6/06</u> DATE