FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Sep 12, 2001 8:00 am Secretary of State **DOCUMENT #** L30244 1. Entity Name 09-12-2001 90013 029 \*\*\*550.00 HORIZON ENGINEERING, INC. Principal Place of Business Mailing Address P. O. BOX 7184 P. O. BOX 7184 WESLEY CHAPEL FL 33544 WESLEY CHAPEL FL 33544 2. Principal Place of Business 3. Mailing Address 814 Monticello Court 814 Monticello Court Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Cora Applied For 4. FEI Number City & State City & State 59-2990042 Not Applicable ape. Coral Country \$8.75 Additional Country П 5. Certificate of Status Desired us Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FRICKE, RICHARD T. (P.O. Box Number is Not Acceptable) **5808 CARINA TRACE WESLEY CHAPEL FL 33544** FL 8. 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (5/01) Delete Change TITLE Helen E. Stallkamp FRICKE, RICHARD T. NAME NAME 814 monticello Court **5808 CARINA TRACE** STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL CITY-ST-ZIP Cape Coral, FL 33904 CITY-ST-ZIP M Change **Addition** TITLE ☐ Delete TITLE Steven Lee Parby NAME NAME 814 Monticello Court STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP... Cape-Coral, FL-33904 ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if

SIGNATURE

changed, or on an attachmen

SEC.

941 - 218 - 4674