

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060777

Entity Name: G.F. HORIZONS UNLIMITED INC.

FILED
Aug 09, 2005
Secretary of State

Current Principal Place of Business:

922 FOREST HILL DR.
CLERMONT, FL 34711

New Principal Place of Business:

922 FOREST HILL DR.
MINNEOLA, FL 34715 US

Current Mailing Address:

922 FOREST HILL DR.
CLERMONT, FL 34711

New Mailing Address:

P.O. BOX 162587
ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 77-0601276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORCHARDT, BRYON
922 FOREST HILL DR.
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

BORCHARDT, BRYON
922 FOREST HILL DR.
MINNEOLA, FL 34715 US

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:

08/09/2005

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: BORCHARDT, BRYON
Address: 922 FOREST HILL DR.
City-St-Zip: CLERMONT, FL 34711

Title: VSD (X) Delete
Name: LAMBERT, WAYNE
Address: 922 FOREST HILL DR.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BORCHARDT, BRYON PRESIDE
Address: 922 FOREST HILL DR.
City-St-Zip: MINNEOLA, FL 34715 US

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 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 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: BRYON BORCHARDT

PRES

08/09/2005

Electronic Signature of Signing Officer or Director

Date