

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168369

Entity Name: UNBOUND POTENTIAL, INC.

FILED  
Apr 11, 2010  
Secretary of State

**Current Principal Place of Business:**

6815 SUMMER COVE DRIVE  
RIVERVIEW, FL 33578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 760  
RIVERVIEW, FL 335680760

**New Mailing Address:**

FEI Number: 51-0564534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBINSON, JORWORSKI B  
6815 SUMMER COVE DRIVE  
RIVERVIEW, FL 33578 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: ROBINSON, JORWORSKI B  
Address: 6815 SUMMER COVE DRIVE  
City-St-Zip: RIVERVIEW, FL 33578

Title: VP/T  
Name: ROBINSON, JORWORSKI B  
Address: 6815 SUMMER COVE DRIVE  
City-St-Zip: RIVERVIEW, FL 33578

Title: S  
Name: ROBINSON, JORWORSKI B  
Address: 6815 SUMMER COVE DRIVE  
City-St-Zip: RIVERVIEW, FL 33578

I hereby 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 all other like empowered.

SIGNATURE: JORWORSKI B ROBINSON

P/D

04/11/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date