

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000103518

FILED
Jul 18, 2007
Secretary of State

Entity Name: BLUE HORIZONS GROUP, INC.

Current Principal Place of Business:

749 MINERVA LANE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

749 MINERVA LANE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 20-5341042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUCE MCMENEMY, CPA
300 NORTH RONALD REAGAN BLVD.
SUITE 308
LONGWOOD, FL 32750 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: P () Delete
Name: SCHNEEBERG, TED
Address: 749 MINERVA LANE
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP () Delete
Name: ZEHEL, KRYSTINE
Address: 749MINERVA LANE
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: TED R. SCHNEEBERG

P

07/18/2007

Electronic Signature of Signing Officer or Director

_____ Date