2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2006 08:00 AM Secretary of State **DOCUMENT # P93000001346** 1. Entity Name HORIZON SUN, INC. Principal Place of Business Malling Address 421 TWIN LAKES DRIVE 421 TWIN LAKES DR PENSACOLA, FL 32504 PENSACOLA, FL 32504-6341 US No Chg-P 02282006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3173236 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STEPHENS, JAY F DO NOT WRITE 421 TWIN LAKES DR **SUITE 220** IN THIS SPACE PENSACOLA, FL 32504 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. I am lamiliar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and tale & applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 P. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees to. OFFICERS AND DIRECTORS DDE NAME STEPHENS, WYLIE U00000489665 STREET ADDRESS 421 TWIN LAKES DR 04/18/06-80025-021 150.00 CATY-SI-ZIP PENSACOLA, FL 32504 BBE STEPHENS, JAY F **421 TWIN LAKES DR** STREET ADDRESS CITY-ST-ZP PENSACOLA, FL. BBF NAME STREET ADDRESS DO NOT WRITE G1Y-51-21P RAF IN THIS SPACE NAME STREET ACORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-S1-209

12. Thereby certify that the information supplied with this filling 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 logal effect as if made under oath, that I am an effect 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 10 or Block 11 if

TITLE NAME STREET ADDRESS CSTY-ST-ZP