## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000056852

City-St-Zip:

GAINESVILLE, FL 32606

Entity Names NEW HORIZON CONCUITIN

FILED May 03, 2004 Secretary of State

| Entity Na  | me: NEW HC  | PRIZON CONSULTING, INC.   |   |  |  |
|--|---|---|---|--|--|
| Current Principal Place of Business:                   |   |   | New Principal Place                         | New Principal Place of Business:       |  |
|  | 47TH LANE<br>LLE, FL 3260                           | 6   |   |  |  |
| Current Mailing Address:                               |   |   | New Mailing Address                         | New Mailing Address:                   |  |
|  | 47TH LANE<br>LLE, FL 3260                           | 6   |   |  |  |
| FEI Number   | : 59-3398386  | FEI Number Applied For()  | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )      |  |
| Name and Address of Current Registered Agent: Name and |   |   |   | Address of New Registered Agent:       |  |
| 1 SE FIRS<br>GAINESVI<br>The above<br>in the State     | LLE, FL 3260<br>e named entity<br>e of Florida.     | 1 US  | e purpose of changing its registered        | d office or registered agent, or both, |  |
| SIGNATURE: Electronic Signature of Registered Agent    |   |   | gent  | <br>Date                               |  |
| Election Car   |   | 03(2)(b), F.S., the corporation did<br>g Trust Fund Contribution().<br>CTORS: | •   | S TO OFFICERS AND DIRECTORS:           |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:            | AMERSON, CH<br>207 COLE PLA                         |   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:            | VP (<br>AMERSON, LII<br>5128 NW 47TH<br>GAINESVILLE | H LANE  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:                            | S (<br>AMERSON, W<br>5128 NW 47Th                   |   | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                |  |

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: WILLIAM P AMERSON S 05/03/2004