

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000072993

Entity Name: MINDS I NO LIMITS, CORP.

**FILED**  
**Sep 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

WILLIAM K HORNECK  
224 CITRUS TRAIL  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

WILLIAM K HORNECK  
224 CITRUS TRAIL  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

FEI Number: 65-0943451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HORNECK, WILLIAM K  
224 CITRUS TRAIL  
BOYNTON BEACH, FL 33436 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HORNECK, WILLIAM K  
Address: 224 CITRUS TRAIL  
City-St-Zip: BOYNTON BEACH, FL 33436

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: WILLIAM K. HORNECK

P

09/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date