

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000004680

**Entity Name:** HORIZONPSI, INC.

**Current Principal Place of Business:**

1101 HORIZON DRIVE  
LAWRENCE, KS 66046

**Current Mailing Address:**

1101 HORIZON DRIVE  
LAWRENCE, KS 66046 US

**FEI Number: 48-0979944**

**Certificate of Status Desired: Yes**

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

MOYER, JAMES KENNETH  
2594 SW RIVER SHORE DR  
PORT ST LUCIE, FL 34984 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KUHL, WESLEY  
Address        5909 WOODFIELD  
City-State-Zip: PARKVILLE MO 64152

Title            ASST. SECRETARY  
Name            NUTTER, DAVID  
Address        1103 KLEIN CT  
City-State-Zip: LAWRENCE KS 66049

Title            TREASURER  
Name            KIRKPATRICK, DOUG  
Address        2864 SE BROOKLYN ST  
City-State-Zip: PORTLAND OR 97202

Title            ASST. SECRETARY  
Name            SCHMELZLE, HAROLD  
Address        2238 ACORN RD  
City-State-Zip: SABETHA KS 66534

Title            SECRETARY  
Name            REMMERS, STEVEN  
Address        525 S PERSIMMON DR  
City-State-Zip: OLATHE KS 66061

Title            OFFICER  
Name            HAWTHORNE, CRYSTAL  
Address        1445 APPLGATE CT  
City-State-Zip: LAWRENCE KS 66049

*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: CRYSTAL HAWTHORNE**

**CONTROLLER**

**04/14/2020**

Electronic Signature of Signing Officer/Director Detail

Date