

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90030 041 ***150.00

DOCUMENT # L19986
1. Entity Name
SOLO DEVELOPMENT CORPORATION

Principal Place of Business
P.O. BOX 568821 (328568821)
908 S. DELANEY AVE
ORLANDO FL 32806-1275
US

Mailing Address
P.O. BOX 568821 (328568821)
908 S. DELANEY AVE
ORLANDO FL 32856-8821
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2977457**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARTER, MAURY L.
908 S. DELANEY AVE
ORLANDO FL 32806

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAT POITRAS, JAMES W. 198 HIGHLAND ST HOLLISTON MA ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT POITRAS, PATRICIA T. 198 HIGHLAND ST HOLLISTON MA ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP POITRAS, EDWARD W. 27 B. MOORE RD HAINES CITY FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP POITRAS, KAY G 27 B. MOORE RD HAINES CITY FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPAT CARTER, MAURY L. 908 S. DELANEY AVE ORLANDO FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVP CARTER, DARYL M. 908 S. DELANEY AVE ORLANDO FL ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daryl M Carter

Apr 22 02

Date

407/422-3144

Daytime Phone #

CR2E034 (9/01)

Attachment # L19986

953/59

Additional Sheet

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2002

SOLO DEVELOPMENT CORPORATION

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

<u>Description</u>	<u>Information</u>	<u>Status</u>
TITLE	S	<u>Addition</u>
NAME	Wray, Pamela L.	(omitted from report)
ADDRESS	908 S Delaney Ave	
CITY-ST-ZIP	Orlando FL 32806-1275	

<u>Description</u>	<u>Information</u>	<u>Status</u>
TITLE	VP	<u>Addition</u>
NAME	Frank L Hornick	(new, this report)
ADDRESS	908 S Delaney Ave	
CITY-ST-ZIP	Orlando FL 32806-1275	

<u>Description</u>	<u>Information</u>	<u>Status</u>
TITLE	AT	<u>Addition</u>
NAME	Robert H Charron, CPA	(new, this report)
ADDRESS	446 Main St	
CITY-ST-ZIP	Worcester MA 01608	