

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000059589

Entity Name: DAWN & KEVIN SOLTIS, INC.

FILED  
Mar 08, 2008  
Secretary of State

**Current Principal Place of Business:**

10335 C.R. 237  
OXFORD, FL 344843236 US

**New Principal Place of Business:**

**Current Mailing Address:**

10335 C.R. 237  
OXFORD, FL 344843236 US

**New Mailing Address:**

FEI Number: 59-3658163      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SOLTIS, DAWN  
10335 C. R. 237  
OXFORD, FL 344843236 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SOLTIS, DAWN  
Address: 10335 C.R. 237  
City-St-Zip: OXFORD, FL 344843236 US

Title: V ( ) Delete  
Name: SOLTIS, KEVIN  
Address: 10335 C.R. 237  
City-St-Zip: OXFORD, FL 344843236 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: DAWN SOLTIS

P

03/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date