

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000118540

Entity Name: SOLAR LAKES, INC.

FILED
Apr 04, 2003
Secretary of State

Current Principal Place of Business:

505 AVE A NW STE 102
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

505 AVE A NW STE 102
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOVONI, BRIAN R
505 AVE A NW STE 102
WINTER HAVEN, FL 33881

Name and Address of New Registered Agent:

GOVONI, HARDING & ASSOCIATES, INC.
505 AVE A NW STE 102
WINTER HAVEN, FL 33881

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: BRIAN R GOVONI

04/04/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TAYLOR, KEITH R
Address: 15 LITTLEFIELD CRESENT CHANDLERS FORD
City-St-Zip: S HAMPTON, HANTS UK, FL 33881

Title: D () Delete
Name: TAYLOR, PENELOPE A
Address: 15 LITTLEFIELD CRESENT CHANDLERS FORD
City-St-Zip: S HAMPTON, HANTS UK, FL 33881

Title: D () Delete
Name: CALLOW, DONALD
Address: 1 PILGRIMS CLOSE CHANDLERS FORD
City-St-Zip: S HAMPTON, HANTS UK, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TAYLOR, KEITH R
Address: 15 LITTLEFIELD CRESENT CHANDLERS FORD
City-St-Zip: SOUTHAMPTON, HANTS, SO SO53 4PB UK

Title: D (X) Change () Addition
Name: TAYLOR, PENELOPE A
Address: 15 LITTLEFIELD CRESENT CHANDLERS FORD
City-St-Zip: SOUTHAMPTON, HANTS, SO SO53 5PB UK

Title: D (X) Change () Addition
Name: CALLOW, DONALD
Address: 1 PILGRIMS CLOSE CHANDLERS FORD
City-St-Zip: SOUTHAMPTON, HANTS, SO SO53 4PB UK

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.

SIGNATURE: KEITH R TAYLOR

D

04/04/2003

Electronic Signature of Signing Officer or Director

Date