


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

04-27-2004 90088 002 ***150.00

DOCUMENT # P03000156475					
1. Entity Name SOLIANT, INC.					
Principal Place of Business ONE INDEPENDENT DR JACKSONVILLE, FL 32202			Mailing Address ONE INDEPENDENT DR JACKSONVILLE, FL 32202		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 52-2437143	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CROUCH, ROBERT P		NAME		
STREET ADDRESS	ONE INDEPENDENT DR		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32202		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CURTIS, DEAN J		NAME		
STREET ADDRESS	ONE INDEPENDENT DR		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32202		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ALEXANDER, DAVID		NAME	David Alexander	
STREET ADDRESS	1979 LAKESIDE PKWY		STREET ADDRESS	1979 Lakeside Pkwy Ste 250	
CITY-ST-ZIP	ATLANTA, GA 30084		CITY-ST-ZIP	Atlanta, GA 30084	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Gerald Robinson			4-22-04 904-360-2704		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

66421976



04202004 Chg-P CR2E034 (10/03)

Attachment
6.6421976
#P03000156475

Officers and Board of Directors		
Soliant, Inc.		
Title	Name	Business Address
Vice President/Secretary	Gregory Holland	One Independent Drive Jacksonville, FL 32202
President	David K. Alexander	1979 Lakeside Parkway Ste 250 Atlanta, GA 30084
SVP/Treasurer	Robert Crouch	One Independent Drive Jacksonville, FL 32202
Asst. Secretary	Tyra Tutor	One Independent Drive Jacksonville, FL 32202
Chief Executive Officer	Timothy D. Payne	One Independent Drive Jacksonville, FL 32202
VP of Taxes	Gerald Robinson	One Independent Drive Jacksonville, FL 32202
- Director	David K. Alexander	One Independent Drive Jacksonville, FL 32202
Director	Robert Crouch	One Independent Drive Jacksonville, FL 32202
Director	Dean Curtis	One Independent Drive Jacksonville, FL 32202