


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 27, 2008 8:00 am
Secretary of State

05-27-2008 90363 001 ***300.00

DOCUMENT # P06000083379 1. Entity Name SOLEY ENTERPRIZES INC.	
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Principal Place of Business 6331 HALL ROAD JAY, FL 32565	Mailing Address 6331 HALL ROAD JAY, FL 32565
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66011993



04232008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-5272976	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SOLEY, JENNICE 6214 HUNTSMAN PASS 6331 Hall Rd MILTON, FL 32570 Jay, FL 32565
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**DO NOT WRITE
IN THIS SPACE**

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: <i>Jennice Soley</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE: <i>4/30/08</i>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOLEY, JENNICE 6331 HALL ROAD JAY, FL 32565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOLEY, LAWRENCE E. 6331 HALL ROAD JAY, FL 32565
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Jennice Soley</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: <i>4/30/08</i> Daytime Phone: <i>830-626-7000</i>
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