

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 30, 2003 8:00 am**  
**Secretary of State**

02-03-2003 90294 009 \*\*\*150.00

**DOCUMENT # P95000081315**

1. Entity Name  
**SOLOMONSON & ASSOCIATES, INC.**



Principal Place of Business  
**4035 TERRIWOOD AVENUE  
ORLANDO FL 32812**

Mailing Address  
**4035 TERRIWOOD AVENUE  
ORLANDO FL 32812**

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 **59-3341614**

Applied For  
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**N. DIANE HOLMES, P.A.  
801 N. MAGNOLIA AVENUE  
SUITE 409  
ORLANDO FL 32803**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
SOLMONSON, SUSAN A  
4035 TERRIWOOD AVENUE  
ORLANDO FL 32812** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
MONSON, CLIFFORD J  
4035 TERRIWOOD AVENUE  
ORLANDO FL 32812** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D-  
SOLMONSON, JILL M  
4035 TERRIWOOD AVENUE  
ORLANDO FL 32812** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
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CITY-ST-ZIP  
☐ Change ☐ Addition

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:

**S. Clifford J. Solomonson**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/25/2003**  
Date

**407.376-2161**  
Daytime Phone #

CR2E034 (4/03)

Attachment

55052715  
#P95000081315

Division of Corporations  
Uniform Business Report filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Reference: UBR #P95000081315 for 2003, Solomonson and Associates, Inc.

Dear Sir or Madam:

On January 29 of this year, we submitted the referenced UBR to your office with a check for \$150.00. Your office deposited the check on February 13. Subsequently, we received correspondence from your office requesting the name and address of the current registered agent. That information was provided by mail at least two months ago (I'm not sure of the exact date).

We have now received a 60-day notice to file a UBR by September 15. On July 21, I talked to an associate in your office and she advised me to send the UBR with the requested information to your office with a letter requesting that my original UBR be accepted and therefore, avoid the late filing fee.

I would appreciate that this request be granted since we have attempted to comply with the original filing date.

Thank you, for you attention to this matter,

*Clifford J. Solomonson*

Clifford J. Solomonson  
Solomonson & Associates, Inc.  
4035 Teriwood Ave.  
Orlando, FL 32812