

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

05-27-2008 90363 001 ***300.00

DOCUMENT # P97000063751

1. Entity Name
SOLEY FENCE CO., INC.



Principal Place of Business

6331 HALL ROAD
JAY, FL 32565 US

Mailing Address

6331 HALL ROAD
JAY, FL 32565 US

66011992



04232008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3455759

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SOLEY, LAWRENCE E
~~6214 HUNTSMAN PASS~~
~~MILTON, FL 32570~~

6331 Hall Rd
Jay, FL 32565

**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

Jennice Soley

(NOTE: Registered Agent signature required when reinstating)

4/30/08

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME SOLEY, LAWRENCE E
STREET ADDRESS ~~6214 HUNTSMAN PASS~~ 6331 Hall Rd
CITY-ST-ZIP ~~MILTON, FL 32570~~ Jay, FL 32565

TITLE VSD
NAME SOLEY, JENNICE
STREET ADDRESS ~~6214 HUNTSMAN PASS~~ 6331 Hall Rd
CITY-ST-ZIP ~~MILTON, FL 32570~~ Jay, FL 32565

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Jennice Soley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/08

Q50-626

Daytime Phone #

1000