


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000101848 1. Entity Name SOLITAIRE CONSULTING, INC.				
Principal Place of Business 3073 SOUTH HORSESHOE DRIVE SUITE 118 NAPLES, FL 34104		Mailing Address 3073 SOUTH HORSESHOE DRIVE SUITE 118 NAPLES, FL 34104		
<h2>DO NOT WRITE IN THIS SPACE</h2>				
6. Name and Address of Current Registered Agent ARNOLD, JOHN L 3073 SOUTH HORSESHOE DRIVE SUITE 118 NAPLES, FL 34104		<h2>DO NOT WRITE IN THIS SPACE</h2>		
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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				
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		
10. OFFICERS AND DIRECTORS		<h2>DO NOT WRITE IN THIS SPACE</h2>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARNOLD, JOHN L 3073 SOUTH HORSESHOE DRIVE STE 118 NAPLES, FL 34104			
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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 another like empowered.				
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 4-9-08 Daytime Phone # 239-643-6333		

FILED
08 APR 28 AM 10:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 CASE 034 (1186)

02082008 No Chg-P

 4. FEI Number
59-3483653

 Applied For
 Not Applicable

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