

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V54340

FILED
Apr 30, 2003
Secretary of State

Entity Name: STOKES/FLORA-SOL, INC.

Current Principal Place of Business:

137 FIFTH ST, NW
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

137 FIFTH ST NW
WINTER HAVEN, FL 33881 US

New Mailing Address:

FEI Number: 59-3139505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, DAVID C
137 FIFTH ST NW
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALBRITTON, NICHOLAS,
Address: ALBRITTON RD
City-St-Zip: ALTURAS, FL

Title: D () Delete
Name: STOKES, DAVID,
Address: 130 S 7TH ST
City-St-Zip: LAKE HAMILTON, FL

Title: D () Delete
Name: ALBRITTON, DALE,
Address: ALBRITTON RD
City-St-Zip: ALTURAS, FL

Title: D () Delete
Name: STOKES, GLEN,
Address: 13000 HATCHINEHA RD
City-St-Zip: HAINES CITY, FL

Title: D () Delete
Name: COKER, MARSHALL,
Address: 1800 HIGHWAY 441, SE
City-St-Zip: OKEECHOBEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID C. CARTER

RA

04/30/2003

Electronic Signature of Signing Officer or Director

Date