FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DIXIE (CONTRACT CARPET, INC	Mailing Address	SUME 100	7 79 110 7 100 11 11 11 11 11 11 11 11 11 11 11 11	
7523 PHILLIPS HWY JACKSONVILLE FL 32218		4215 SOUTHPOINT BLVD SI JACKSONVILLE FL 32216-0976			
US				3. Date Incorporated or Qualified 01/08/1960	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2e. Mailing Address		4. FEI Number	Applied For
21		26		59-0902287	Not Applicable
Suite, Apt. #, etc.		Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stati	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
-Z ₍ p) 24	Country 25	Zip 29	Country 30	8. This corporation has liability for Florida Statutes	iotangible tax under s. 199.032, Yes No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Re	gistered Agent
	COBSON,LEO	•	81 Name	9	
	23 PHILLIPS HWY		82 Stree	t Address (P.O. Box Number is Not Acceptat	ole)
JA	CKSONVILLE FL 32216		83		
			63		
			84 City		FL 85 Zip Code
	to the provisions of Sections 607 registered agent, or both, in the S m familiar with, and accept the o	0502 and 607.1508, Florida Statut tate of Florida. Such change was a biligations of, Section 607.0505, Flo	es, the above-name authorized by the co orida Statutes.	d corporation submits this statement for the proporation's board of directors. I hereby acce	
SIGNATURE	Sign dure, typed or punied harne of registere	d agent and too if applicable (NOT	: Registered Agent signat.	re required when reinstating)	DATE
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
Tinf	JACOBSON, SAM	☐ DELETÉ	1.1 TITLE		Change Addition
. NAME	7523 PHILLIPS HWY		1.2 NAME		
STREET ADDRESS	JACKSONVILLE FL		1.3 STREET ADDRESS		
CHY-SI-ZIP	D DONOCHARTE LE	DELETE	1.4 City-ST-ZIP		Change Addition
TIFLE	JACOBSON, SHEILA I	L"1 ∩crett	2.1 TITLE 2.2 NAME		Fil quanda Fil wadiilou
NAME STREET ADDRESS	7523 PHILLIPS HWY		23 STREET ADDRESS		
- 51803 AUUN055 - COY-51-741	JACKSONVILLE FL		2 4 CITY-ST-ZIP	·	
TIL	TD	DELETE	3.1 TITLE		Change Addition
NAME	JACOBSON, LEO	•	3.2 NAME		• - •
STREET ADDRESS	7523 PHILLIPS HWY		3.3 STREET ADDRESS	: [
CHY+S1 ZIP	JACKSONVILLE FL		3.4. CITY - ST - ZIP		
THTLE	V8	DELETE	4.1 TITLE		Change Addition
NAME:	jacobson, sheila i.		4. 2 NAME		

JACKSONVILLE FL 6.4 CITY-ST-ZIP C) T7 - S1 - 7(P) his filing doe, not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the montal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that receiver of rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name attacts ment with an address. 14. I do hereby certify that the information supplied information indicated on this annual report or an Lam an officer or director of the corporappears in Block 12 or Block 13 # cha

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

5 1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADOLESS

STREET ADDRESS

STREET ADDRESS

CHY-ST ZIF

CHIV-S1-ZP

 $10\,\mathrm{eF}$

THEF

NAME

7523 PHILLIPS HWY

JACKSONVILLE FL

SASSARD, CHERYL

JACOBSON, LEO

7523 PHILLIPS HWY

4215 SOUTHPOINT BLVD 100

JACKSONVILLE, FL 00000

DELETE

DELETE

Daytime Phone #

Change

Change

Addition

Addition

FILED

Apr 18 1997 8:00am

Secretary of State