DOCUMENT # 323298 1. Entity Name DIXIE METAL PRODUCTS, INC.						Apr 02, 2002 8:00 am Secretary of State 04-02-2002 90885 003 ***150.00			
Principal Place of Business 442 S.W. 54TH COURT OCALA FL 34474 US Mailing Address 442 S.W. 54TH COURT US									
2. Principal P	lace of Busir	ness	3. Mailing Address	Mailing Address		T I DOLDO TITTO FLOOR TELED TIDIO IDEOL FOLL DI	/# # # # # # # # # # # # # # # # # # #		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State			City & State		4.	FEI Number 59-1196205	⊢	plied For t Applicable	
Zip	Country		Zip	Country		Certificate of Status Desired	¢0.75 Auto	litional	
	6. Name	and Address of Current	Registered Agent		7.	7. Name and Address of New Registered Agent			
Some Service S						سيان والمنافقين والمنافقة	r committee and the second		
SCHNORR 442 S.W. S	-			Street Addre	ddress (P.O. Box Number is Not Acceptable)				
OCALA FL 34474									
				City	City FL Zip Code				
8. The above	named entit	y submits this statement fo	r the purpose of changing its re	egistered office or regi	istered a	gent, or both, in the State of Florida.			
SIGNATURE.									
	Signature, typed	or printed name of registered agent a	and title if applicable. (NOTE: f	Registered Agent signature rec	uired when	reinstating) D	DATE		
	ible to satisfy its Intangible and elects to do so.		FEE IS \$150.00 Fee will be \$550.0 to Department of		Election Campaign Financing Trust Fund Contribution.	+	0 May Be I to Fees		
11.		OFFICERS AND	DIRECTORS	II 12.	ester − Al	DDITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 11	
TITLE		• -	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	den er		☐ Change	☐ Addition	
STREET ADDRESS	P SCHNORF 1471 NEP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO SCHNORF 1471"NEP	I, JOHN L JR TUNE DRIVE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		and the second s	☐ Change	Addition	
TITLE NAME	V CUSANO, 1471 NEP	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
NAME STREET ADDRESS	ST WRIGHT, 1471 NEP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

2002 UNIFORM BUSINESS REPORT (UBR)