

**2006 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT**


APPROVAL
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JSC

DOCUMENT # 747051			
1. Entity Name OLD DIXIE CONDOMINIUM WAREHOUSE ASSOCIATION, INC			
Principal Place of Business 1310 S KILLIAN DR # 113 LAKE PARK, FL 33403		Mailing Address 1310 S KILLIAN DR # 113 LAKE PARK, FL 33403 US	
2. Principal Place of Business		3. Mailing Address	
Subs. Apt. #, etc.		Subs. Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LUMB, HENRY O 1050 POWELL DR. RIVIERA BEACH, FL 33404		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and SSN if applicable. (NOTE: Registered Agent signature required when registering)</small>			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LONG, HEIDI 1820 SERVICE RD NORTH PALM BEACH, FL 33408 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 700081915237 11/17/06--01062--004 **\$1.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST LUMB, HENRY 1050 POWELL DRIVE RIVIERA BEACH, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WHITE, AUSTIN 1202 12TH LANE PALM BEACH GARDENS, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PELEGRINO, ELIZABETH PO BOX 14207 N. PALM BEACH, FL 33408 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PELEGRINO, JERRY PO BOX 14207 NORTH PALM BEACH, FL 33408 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINEHAN, SCOTT 7720 150TH RD N PALM BEACH GARDENS, FL 33418 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PICK, RAYMOND 15275 NATURES PT LA WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HEATON, BENJAMIN 2031 MOCKINGBIRD LA. N. PALM BEACH, FL 33408 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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 617, 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: <i>Henry O Lumb</i>		HENRY O LUMB 11/14/06 (561) 842-3308	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>		<small>Date</small>	

202

2006 Not-For-Profit Amended Annual Report

Document 747051 FEI 59-2304339

Old Dixie Condominium Warehouse Association, Inc.

SUPPLEMENTAL SHEET

D.

Pick, Raymond

15275 Natures Pt La.

Wellington, FL 33414

Henry O. Grant

11/14/06