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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G15170

(5)

DIXIE WINDOW CO., INC.

Principal Place of Business		Mailing Address		
% W. E. LARK, SR. 628 OAK AVE PANAMA CITY FL 32401		% W. E. LARK. SR. 628 OAK AVE PANAMA CITY FL 32401-2642		Date Incorporated or Qualified 3e. Date of Last Report
				12/27/1982 02/09/1996
2. Principal FI	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-2247801 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required
City & State	9	City & State		
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24	25	[29]	30	Florida Statutes Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent
	K, W. E., SR.		OI IVARITO	
	OAK AVE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)
PAN	IAMA CITY FL 32401		83	
			84 City	10-1 7'- Code
				FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE.				
	Signature, typed or printed name of registered ag	ord and tille if applicable. (NO	TE Registered Agent signature requir	**
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D HADY MADY E	L.] DELETE	1.1 TITLE	L. Change L. Addition
NAME STREET ADORESS	LARK, MARY E 344 S BONITA AVE		1.2 NAME	
CITY-ST-ZIP	PANAMA CITY, FL 00000		1.3 STREET ADDRESS 1.4 CITY - ST- ZIP	
TITLE	P	☐ DELETE	2.1 TITLE	Change Addition
NAME	LARK, SR. W		2.2 NAME	
STREET ADDRESS	344 S BONITA AVE		2.3 STREET ADDRESS	
CHY-ST-ZIP	PANAMA CITY, FL 00000		2.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	3.1 TITLE	Change Addition
NAME	LARK, RUTH P		3.2 NAME	·
STREET ADDRESS	344 S BONITA AVE PANAMA CITY, FL 00000	•	3.3 STREET ADDRESS	
DITYLE	FANAMA UIIT, FL WWW	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
City+St-ZiP			4.4 CITY-ST-ZIP	
TFLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY - ST - ZIP		☐ DELETE	5.4 CITY-ST-ZIP	- Donne - Lagran
TITLE NAME			6.1 TITLE 6.2 NAME	Change L Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	
CITY-ST-ZIP			6.3 STREET ADDRESS	
14. I do heret	by certify that the information supplie	d with this filing does not qual	ify for the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the
information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.				

SIGNATURE: Will & Call WING F. LARK 2-10-97 (904) 769-351