

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

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PROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILE NO. 2000 90024 036 \*\*\*150.00 P98000033871

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P98000033871

1. Corporation Name DIXON DESIGN ASSOCIATES, INC.

Principal Place of Business

2476 KINGSMILL AVENUE MELBOURNE FL 32934

Mailing Address

2476 KINGSMILL AVENUE MELBOURNE FL 32934

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1998

4. FEI Number

59-351 7445

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

DIXON, WINONA J 2476 KINGSMILL AVENUE MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for title, name, street address, city-st-zip, and checkboxes for delete, change, or add.

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 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 address, with all other "I" empowered.

SIGNATURE: Winona J. Dixon, President 7/31/00 - 321-725-2057 WINONA J DIXON



804 EAST PALMETTO AVENUE  
MELBOURNE, FLORIDA 32901  
TELEPHONE: 407-725-2057  
FLORIDA LICENSE 6102

ATTACHMENT  
P98000033071  
B0104433  
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**DIXON DESIGN ASSOCIATES, INC.**  
ARCHITECTURE ■ PLANNING ■ INTERIOR DESIGN

August 1, 2000

Division of Corporations  
Annual Reports Filings  
PO Box 1500  
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Enclosed is a check for the amount of \$150.00. During the time when this corporation filing was due I suffered a number of illness and was absent from my office a great deal of time. Consequently the form was mislaid and I still cannot find it.

I run a small one man office in a small town and my annual revenue is also small. A \$400.00 late filing penalty in what is to be a poor year will seriously impact the well being of this corporation.

I am therefore requesting that the late filing penalty be waived this year. I have finally gotten control of this office and an oversight like this shall never happen again.

I thank you for your indulgence in this matter and I await your reply.

Yours very truly,  
DIXON DESIGN ASSOCIATES, INC.

LAWRENCE M. DIXON, SECRETARY