

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 227808

FILED
Mar 28, 2009
Secretary of State

Entity Name: DIXIE OIL & GAS COMPANY

Current Principal Place of Business:

1303 W MAIN STREET
P O BOX 491257
LEESBURG, FL 347491257

New Principal Place of Business:

1303 W MAIN STREET
BOX 491257
LEESBURG, FL 34749

Current Mailing Address:

1303 W MAIN STREET
P O BOX 491257
LEESBURG, FL 347491257

New Mailing Address:

1303 W MAIN STREET
BOX 491257
LEESBURG, FL 34749

FEI Number: 59-0876968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTICK, WILLIAM A.
1301 W MAIN STREET
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATTICK, WILLIAM A.
Address: 1303 W. MAIN STREET
City-St-Zip: LEESBURG, FL

Title: SD () Delete
Name: MATTICK, ANN K.
Address: 1303 W. MAIN STREET
City-St-Zip: LEESBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM A MATTICK

PD

03/28/2009

Electronic Signature of Signing Officer or Director

Date