

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

FILED  
Apr 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 267188 (1)  
1. Corporation Name  
DIXIE FENCE CO., INC.

Principal Place of Business  
8460 SW 48 ST.  
MIAMI FL 33155

Mailing Address  
8460 SW 48 ST.  
MIAMI FL 33155



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/15/1963	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1025370		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BLIZZARD, VIRGINIA 8460 SW 48 ST. MIAMI FL 33155		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. City	
85. Zip Code		FL	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLIZZARD, JAMES	12. NAME	
STREET ADDRESS	5860 S.W. 90TH CT.	13. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33173	14. CITY - ST - ZIP	
TITLE	S	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLIZZARD, SUSAN J	22. NAME	
STREET ADDRESS	3057 DOVE WAY	23. STREET ADDRESS	
CITY - ST - ZIP	DECATUR GA 30033	24. CITY - ST - ZIP	
TITLE	VT	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLIZZARD, VIRGINIA T	32. NAME	
STREET ADDRESS	8460 SW 48 ST.	33. STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33155	34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

14. 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 an address.

SIGNATURE: Virginia T. Blizzard VT 4/21/98 305-279-7502

CR2E034 (10/97)