## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 294409**

FILED Jan 26, 2007 Secretary of State

Entity Name: DIXIE BUICK PONTIAC GMC TRUCK, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	AMIAMI TRAIL S, FL 33912	US		
urrent N	lailing Addres	ss:	New Mailing Addres	ss:
	60165 FAMIAMI TRAIL S, FL 33906	US		
El Number	r: 59-1100101	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	ROBERT C			
	TAMIAMI TRAIL ERS, FL 3391:			
ORT MY he above	ERS, FL 3391.	2 US	purpose of changing its registere	ed office or registered agent, or both,
ORT MY he above the State	ERS, FL 3391: e named entity : e of Florida.	2 US	purpose of changing its registere	ed office or registered agent, or both,
ORT MY ne above the State	ERS, FL 3391: e named entity : e of Florida. RE:	2 US		ed office or registered agent, or both,  Date
ORT MY he above the State	ERS, FL 3391: e named entity: e of Florida. RE: Electror	2 US submits this statement for the		
ORT MY he above the State IGNATU	ERS, FL 3391: e named entity: e of Florida. RE: Electror	2 US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution ( ).	ent	
ORT MY he above the State IGNATU	e named entity e of Florida.  RE: Electror  mpaign Financing	2 US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: Delete ERT C STICKS BLVD.	ent	Date
ORT MY the above the State IGNATUI ection Car FFICER ttle: ame: ddress:	e named entity : e of Florida.  RE: Electror  mpaign Financing  S AND DIREC  PD () ADKINS, ROBE 15232 FIDDLE FORT MYERS,	2 US submits this statement for the nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: Delete ERT C STICKS BLVD. FL 33912 Delete LYN H, STICKS BLVD.	ent  ADDITIONS/CHANG  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT N ADKINS MR 01/26/2007