

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 294409

FILED
Feb 13, 2009
Secretary of State

Entity Name: DIXIE BUICK PONTIAC GMC TRUCK, INC.

Current Principal Place of Business:

14565 S TAMIAMI TRAIL
FT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60165
14565 S. TAMIAMI TRAIL
FT MYERS, FL 33906 US

New Mailing Address:

FEI Number: 59-1100101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADKINS ROBERT C
14565 S. TAMIAMI TRAIL
FORT MYERS, FL 33912 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: ADKINS, ROBERT C
Address: 15232 FIDDLESTICKS BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: ST () Delete
Name: ADKINS, MARILYN H.
Address: 15232 FIDDLESTICKS BLVD.
City-St-Zip: FORT MYERS, FL 33912

Title: V () Delete
Name: ADKINS, ROBERT NELSON
Address: 880 DEAN WAY
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ADKINS, ROBERT C
Address: 15232 FIDDLESTICKS BLVD.
City-St-Zip: FORT MYERS, FL 33912

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

Title: VP D (X) Change () Addition
Name: ADKINS, ROBERT NELSON
Address: 880 DEAN WAY
City-St-Zip: FORT MYERS, FL 33919

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: ROBERT N ADKINS

VP

02/13/2009

Electronic Signature of Signing Officer or Director

_____ Date