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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 29 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 417595

1. Corporation Name
DIXIE SALES GROUP, INC.

(6)

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Principal Place of Business		Mailing Address		C CODE CORE CIRCLE CORE BUILD CONTRACTOR	Butt Bibit bidis didit bibit gibit bibit 1941
2112 WHITEFIELD PARK AVE SARASOTA FL 34243		2112 WHITEFIELD PARK AVE SARASOTA FL 34243-4073			
				3. Date Incorporated or Qualific 01/29/1973	od 3a. Date of Last Fleport 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1447642	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		h		6. Election Campaign Financing	
Zip	Country	Z _{ip}	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	Florida Statutes	for intangible tax under s. 199.032,
**1	9. Name and Address of Currer		1301	10. Name and Address of New	
MOM	ITGOMERY, DAVID PAUL, ESQ.		81 Nam	- A	
OSOO MANATEE AVE W			Address (DO Da N	-1-61-3	
BRA	DENTON FL 33505		82 Stree	et Address (P.O. Box Number is Not Accep	otable)
			83		
			84 City		
			- 7		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the above-name	ed corporation submits this statement for the organization's board of directors. I hereby ac	ne purpose of changing its registered
agent. La	registered agent, or both, in the State im familiar with, and accept the oblig-	of Florida, Such change was ations of, Section 607.0505, F	authorized by the ci lorida Statutes.	orporation's board of directors. I hereby ac	cept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered age			ure required when reinstating)	DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	WESTLUND, ROBERT R.	DELETE	1.1 TITLE		Change 🔲 Addition
NAME	1259 DOCKSIDE PLACE		1.2 NAME	1000	
STREET ADORESS	SARASOTA FL		1.3 STREET ADDRES	5AP450TA GC, 3423	./
CITY-ST-ZIP	SD	- Driese	14 CHY-\$1-7IP	34045011 pt, 3923	1
TITLE	WESTLUND, CHRISTINE S.	☐ DELETE	21 1IILE		* Change ☐ Addition
NAME	1259 DOCKSIDE PLACE		2.2 NAME	8 2720 515T ST _	
STREET ADDRESS	SARASOTA FL		2.3 STREET ADDRESS	SARASOTA FC. 3429	111
CITY-ST-ZIP TITLE	V	DELETE	2.4 City-St-ZiP 3.1 Title	SHICKSOIN OC. 3423	
NAME	WESTLUND, CHRISTINE S.	□ ptrtst	3.1 ITILE 3.2 NAME		Change L_ Addition
STREET ADDRESS	1259 DOCKSIDE PLACE		3.3 STREET ADDRESS	2720 SIST ST.	
CITY-ST-ZIP	SARASOTA FL		3.4. CITY-ST-ZIP	SARASOTA FC. 3123	L.J
TITLE	0.10.00	DELETE	4.1 TOLE	0.1141 (0141 ,00. 0100	Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		-	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	s J	· ·
CITY-ST-ZIP			5.4 CITY- \$1 - ZiP		ĺ
TITLE		DELETE	61 TRLE		Change Addition
NAME			6.2 NAME	}	
STREET ADDRESS			6 3 STREET ADDRESS	s	

14. I do 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 empayered 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 or trustee empayered to execute this report as required by Chapter 607, Florida Statutes; and that my name

64 CITY-ST-ZIP