


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 441863</b> 1. Entity Name <b>DIXIE PLUMBING &amp; SUPPLY, INC.</b>	
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Principal Place of Business <b>912 MALTBY AVE ORLANDO FL 32803</b>	Mailing Address <b>912 MALTBY AVE ORLANDO FL 32803</b>
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1st MOORE CR2E034 (10/05)

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip

4. FEI Number <b>59-1499767</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>
<b>POSEY, MARSHALL 2618 E. CHURCH ST. ORLANDO FL 32803</b>

<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
<b>FL</b> Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D <input type="checkbox"/> Delete	NAME POSEY, MARSHALL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add	
STREET ADDRESS 2618 E. CHURCH ST.	CITY-ST-ZIP ORLANDO FL	NAME	
STREET ADDRESS 2618 E. CHURCH ST.	CITY-ST-ZIP ORLANDO FL	STREET ADDRESS	
CITY-ST-ZIP ORLANDO FL	CITY-ST-ZIP ORLANDO FL	CITY-ST-ZIP	
TITLE SD <input type="checkbox"/> Delete	NAME POSEY, LUCILLE	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Add	
STREET ADDRESS 2618 E. CHURCH ST.	CITY-ST-ZIP ORLANDO FL	NAME	
STREET ADDRESS 2618 E. CHURCH ST.	CITY-ST-ZIP ORLANDO FL	STREET ADDRESS	
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01/25/06-80042-017 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marshall Posey **MARSHALL POSEY** 1-18-06 407-414-4056  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #