2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 20, 2007 08:00 A Secretary of State

ANNUAL REPURI		Secretary of	Q 1
DOCUMENT # 517975 1. Entity Name DIXIE MINI MAID SERVICES, INC.		Secretary or	3 1
Principal Place of Business 151 MARY ESTHER BLVD SUITE 509 MARY ESTHER, FL 32569 US Mailing Address 151 MARY ESTHER BL SUITE 509 MARY ESTHER, FL 32569			
DO NOT WRITE IN THIS S	PACE	02152007 No Chg-P CR2E034 (11/05) 4. FEI Number	9
6. Name and Address of Current Registered Agent			
GROAT, SHIRLEY 215 SOTIR ST FT WALTON BCH, FL 32548		DO NOT WRITE IN THIS SPACE	
The above named entity submits this statement for the purpose of changing its the obligations of registered agent.	s registered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accep	ī
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NO	TE: Registered Agent signature require	red when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campring Trust Fund Con		5.00 May Be dded to Fees	
10. OFFICERS AND DIRECTORS			
ITILE PD NAME GROAT, SHIRLEY STREET ADDRESS 215 SOTIR ST. CITY-ST-ZIP FT. WALTON BCH FL,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP	•		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal affect 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:

TITLE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PUNTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/07

850-243-3588

000000720055 05/01/07-80090-006 150.00

Daytime Phone I