2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mar 16, 2005 08:00 AM **DOCUMENT # 597914 Secretary of State** DIXIE SEPTIC TANK, INC. OF ORANGE CITY Principal Place of Business Mailing Address 1200 S. LEAVITT AVE. PO BOX 740557 PO BOX 740557 ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 03142005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1870680 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EVANS, MARILYN J DO NOT WRITE 1200 S LEAVITT AVENUE ORANGE CITY, FL 32763 IN THIS SPACE 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_ Signature, typod or printed name of registered againt and title if applicable (NOTE: Registered Agent signature required when reinstalling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PTD TITLE NAME EVANS, MILTON E SR STREET ADDRESS 1200 S LEAVITT AVENUE U00000264203 ORANGE CITY, FL 32763 CITY-ST-ZIP 03/16/05-80007-002 150.00 TITLE EVANS, MILTON E SR NAME STREET ADDRESS 1200 S LEAVITT AVENUE CITY-ST-ZIP ORANGE CITY, FL 32763 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SY-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

FILED