

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90215 027 ***150.00

DOCUMENT # 597914

1. Entity Name
DIXIE SEPTIC TANK, INC. OF ORANGE CITY



Principal Place of Business
**1200 S. LEAVITT AVE.
PO BOX 740557
ORANGE CITY FL 32763
US**

Mailing Address
**1473 N VOLUSIA
PO BOX 740557
ORANGE CITY FL 32763**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 740557

City & State

City & State

Orange City FL

4. FEI Number

59-1870680

Applied For

Not Applicable

Zip

Country

Zip

Country

32774

Volusia

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**EVANS, MARILYN J
1473 N VOLUSIA
ORANGE CITY FL**

Name

Street Address (P.O. Box Number is Not Acceptable)

1200 S. Leavitt Ave.

City

Orange City

FL

Zip Code

32763

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

Marilyn J Evans

1-08-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
EVANS, MILTON E SR
1473 N VOLUSIA
ORANGE CITY FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1200 S. Leavitt Ave
Orange City, Fla 32763** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
EVANS, MILTON E SR
1473 N VOLUSIA
ORANGE CITY FL** ☐ Delete

TITLE
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CITY-ST-ZIP
**1200 S Leavitt Ave
Orange City, Fla 32763** ☒ Change ☐ Addition

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12. I 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 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:

Milton E Evans
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-08-03

Date

387-775-3051

Daytime Phone #

CR2E034 (10/02)