

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 852813 (5)

1. Corporation Name

DIXIE GAS & OIL COMPANY, INC.

Principal Place of Business

HIGHWAY 82 E. RT. 5
TIFTON GA 31794

Mailing Address

HIGHWAY 82 E. RT. 5
TIFTON GA 31794



2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
05/07/1982	03/22/1995
4. FEI Number	Applied For Not Applicable
58-0692890	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

LINDSEY, W. F.
901 LIVE OAK PLANTATION RD.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering.)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	LINDSEY, BOBBY	1.2 NAME	
STREET ADDRESS	MELBA DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	TIFTON GA	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	☒ Change ☐ Addition
NAME	DENBY, RHEUDEAN	2.2 NAME	
STREET ADDRESS	704 E. 8TH ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	TIFTON GA	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	LINDSEY, W.F.	3.2 NAME	
STREET ADDRESS	901 LIVE OAK PLANTATION	3.3 STREET ADDRESS	
CITY - ST - ZIP	TALLAHASSEE FL	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	LINDSEY, W. F., MRS.	4.2 NAME	
STREET ADDRESS	901 LIVE OAK PLANTATION	4.3 STREET ADDRESS	
CITY - ST - ZIP	TALLAHASSEE FL	4.4 CITY - ST - ZIP	
TITLE	ST	5.1 TITLE	☐ Change ☐ Addition
NAME	MCCALL, W.A.	5.2 NAME	
STREET ADDRESS	2201 MEADOWBROOK DRIVE	5.3 STREET ADDRESS	
CITY - ST - ZIP	TIFTON GA	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empowered 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 on an attachment with an address.

SIGNATURE:

W. A. McCall, Secretary & Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96
Date

912-382-7112
Daytime Phone

CR2E034 (12/95)