SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jul 27, 1999 8:00 am Secretary of State

07-27-1999 90031 020 ***150.00

596883 - 90031 - 20

DOCUMENT # F21 1. Corporation Name

1999

DODT DIVIE DEVELOPMENT INC

| PONT D | IXIE DEVELOPMENT, INC. | | | | | | | | | | , |
|--------------------------------------|---|---|-------------|--------------------|----------------------------|--|---------------------------|------------------------|-------------------------|--|--|
| Principal Place | of Business | Mailing Address | | | | | | i dili bidili l | ABU DIBU | | |
| 26 8TH ST SHALIMAR FL 32579 US | | 26 8TH ST P. G. Ben' 833 Shalimar Fl 32579 | | | DO NOT WRITE IN THIS SPACE | | | | | | |
| | | US | | | | 3. Date incorporated or Qualified 03/02/1981 | | | | | |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | 4 1 | 7 | | 4. FEI Number | | | Applied | d For | _ |
| 21 | | 26 26 8 Th Steat | | | | 59-2069296 Not Applica | | | | | _ |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | 5 Addi Requir | | |
| 22 City & State | | City & State | | - | -/ | 6. Election Campaign Financing | | \$5.0 | 00 Ma | v Be | 1 |
| 23 | | 28 Ch A/2MH | 7Rm | | lastra. | Trust Fund Contribution | | | ed to F | • | |
| Zip | Country | Zip 17.0 | Cou | ntry | 24 | 8. This corporation owes the curre | nt year | | $\overline{}$ | | 7 |
| 24 | 25 | 29 3 25 '/ | 30 01 | 4 | 9/005P | Intangible Personal Property. | L | Yes | ∐ No | 0 | _ |
| | 9. Name and Address of Current | Registered Agent | | Ι, | | 10. Name and Address of New R | gistered / | \gent | | | 4 |
| | | | | 81 | Name | | | | | | |
| | SAY, JAMES R | | | 82 | Street Addr | ress (P.O. Box Number is Not Acceptal | ole) | | | | 7 |
| | BTH ST | | | | | · · · · · · · · · · · · · · · · · · · | | | | | 4 |
| SHA | LIMAR FL 32579 | | | 83 | | | | | | | İ |
| | | | | 84 | City | | FL | 85 2 | ip Cod | е | |
| office or r agent. I a | to the provisions of sections 607.0502 registered agent, or both, in the State um familiar with, and accept the obligations are sections. | of Florida. Such change was a | iuthorizei | a by ' | the corporati | ration submits this statement for the pu on's board of directors. I hereby accept | rpose of ch the appoir | anging it itment as | s registo s registo | ered ered | |
| SIGNATURE _ | Signature, typed or printed name of registered agent | and title if applicable. (NC | TE: Registe | red Ag | ent signature requ | uired when reinstating) | DATE | | | | -l a |
| 12. | OFFICERS AND | D DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFF | ICERS AN | DIREC | TORS | IN 12 | 00 00 00 00 00 00 00 00 |
| TITLE | PST | ☐ DELETE | 1.1 TIT | TLE | | | t | Chan | де ∟ | Addition | = |
| NAME | LIVESAY, JAMES R 👙 | | 1,2 NA | 1.2 NAME | | | | | | | 6 |
| STREET ADDRESS | 26 8TH ST | | 1.3 ST | REET | ADDRESS | | | | | | DOED |
| CITY-ST-ZIP | SHALIMAR FL | | 1.4 Cf | TY-ST- | ZIP | | | | | | վ է |
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| NAME | | | 2.2 NA | AME | | | | | | | 1 |
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| TITLE | | DELETE | | | | | 1 | Chan | ge L | Addition | |
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| NAME | | | 4.2 N | | | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | TY-\$T- | ZIP | <u></u> | r | | | 1 | \dashv |
| TITLE | | DELETE | 5.1 TI | TLE | 1 | | l | Chan | ge L | Addition | - |

6.4 CITY-ST-ZIP 14. 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 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.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

PORTDIXIE DEVELOPMENT, INC. 26 8TH STREET SHALIMAR, FLORIDA 32579

1.78

July 14, 1999

Division Of Corporations

Annual Reports Filings

P.O. Box 1500

Tallahassee, FL. 32302-1500

Madam Or Sir,

Pursuant to advice given by the Department Of State Reinstatement Examinator, Enclosed is the annual report for Port Dixie Development, Inc. with the standard one-hundred fifty dollar filing fee.

The Corporate Reports were lost and were not noted as such until the receipt of the second notice.

Please accept this Report with the attached payment.

Thank you for your consideration.

James -Livesay-