

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000002303 (5) 1. Corporation Name FORE DIXIE DEVELOPMENT CO., INC.
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Principal Place of Business PO BOX 567 FLOMATON AL 36441	Mailing Address PO BOX 567 FLOMATON AL 36441
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 05/04/1994	3a. Date of Last Report 04/08/1996
				4. FEI Number 63-0511130	Applied For Not Applicable
				5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent SCOTT, FRANCES F 4614 DOBSON ST JAY FL 32565		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P FORE, CHARLES E	1.2 NAME	
STREET ADDRESS	OLD FANNIE RD, PO BOX 567	1.3 STREET ADDRESS	123 FANNIE RD.
CITY-ST-ZIP	FLOMATON AL	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V FORE, CHARLES D	2.2 NAME	
STREET ADDRESS	OLD FANNIE RD, PO BOX 567	2.3 STREET ADDRESS	1601 OLD FANNIE RD.
CITY-ST-ZIP	FLOMATON AL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S BALLARD, GLORIA E	3.2 NAME	600002284936--2
STREET ADDRESS	616 PALAFOX ST	3.3 STREET ADDRESS	-09/04/97--01084--002
CITY-ST-ZIP	FLOMATON AL	3.4 CITY-ST-ZIP	****208.75 ****208.75
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	T PATE, SHARON	4.2 NAME	
STREET ADDRESS	UPPER CREEK RD, PO BOX 567	4.3 STREET ADDRESS	15 HALF ACRE CIRCLE
CITY-ST-ZIP	FLOMATON AL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: *Gloria E. Ballard* SECRETARY AUGUST 29, 1997 334 296-2021

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FILED
97 SEP -2 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (4/97)



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FORE DIXIE DEVELOPMENT CO., INC.

P. O. BOX 567
FLOMATON, ALABAMA 36441

August 29, 1997

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: 1997 Corporation Annual Report

To Whom It May Concern:

On the preparation of our fiscal year closure, it was brought to my attention that our above report for 1997 had not been filed. On further checking, we did not receive a first notice so that we could file the annual report in a timely fashion, we only have the 2nd notice that carries a stiff penalty.

I am enclosing a check in the amount of \$ 208.75 to cover the charge for the original report and I ask that you rescind the penalty.

I want to Thank You for any consideration that you give us in this matter.

Sincerely,

Gloria E. Ballard
Secretary

GEB/cof
attachments