

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005116

1. Entity Name

DIXIE SALES COMPANY, INC. (NC)

FILED

Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90061 032 ***150.00

Principal Place of Business

5920 SUMMIT AVE.
BROWNS SUMMIT NC 27214

Mailing Address

5920 SUMMIT AVE.
BROWNS SUMMIT NC 27214

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 56-0521802

Applied For
Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
	CPD			
	STARMER, J.E. JR.	5920 SUMMIT AVE	BROWNS SUMMIT NC 27214	
	VS			
	STARMER, RICHARD	5920 SUMMIT AVE.	BROWNS SUMMIT NC 27214	
	AS			
	ISAACSON, MARC L	101 W. FRIENDLY AVE., STE. 400	GREENSBORO NC 27401	
	V			
	GARRETT, LAURA S	5920 SUMMIT AVE	BROWNS SUMMIT NC 27214	

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Laura S. Garrett*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-01

Date

336-375-7500

Daytime Phone #

CR2E034 (10/00)