

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99039

Entity Name: DIXIE GROWERS, INC.

FILED  
Jan 12, 2010  
Secretary of State

## Current Principal Place of Business:

1305 MARTIN L. KING JR. BLVD  
UNIT 17  
PLANT CITY, FL 33566 US

## Current Mailing Address:

P.O. BOX 1686  
PO BOX 1686  
PLANT CITY, FL 335641686 US

## New Principal Place of Business:

1305 MARTIN L. KING JR. BLVD  
UNIT 17  
PLANT CITY, FL 33563 US

## New Mailing Address:

P.O. BOX 1686  
PLANT CITY, FL 33564 US

FEI Number: 59-2231288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAWTON, CHARLES  
1305 MARTIN LUTHER KING JR BLVD UNIT 17  
PLANT CITY, FL 33566 US

## Name and Address of New Registered Agent:

LAWTON, CHARLES E PRES TR  
1305 MARTIN LUTHER KING JR BLVD  
UNIT 17  
PLANT CITY, FL 33566 US

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: CHARLES E. LAWTON

01/12/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT  
Name: LAWTON, CHARLES E PRES TR  
Address: 1305 MARTIN LUTHER KING JR BLVD UNIT 17  
City-St-Zip: PLANT CITY, FL 33563 US

Title: VS  
Name: LAWTON, LINDA T VP SEC  
Address: 1305 MARTIN LUTHER KING JR. BLVD UNIT 17  
City-St-Zip: PLANT CITY, FL 33563 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LINDA T LAWTON

VP

01/12/2010

Electronic Signature of Signing Officer or Director

Date