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Jun 08, 1999 8:00 am  
Secretary of State

06-08-1999 90002 014 \*\*\*558.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G38004

1. Corporation Name  
VERNON DIXON TRUCKING, INC.

Principal Place of Business: % VERNON DIXON, 2410 AVE. D, FT. PIERCE FL 34950-2756  
Mailing Address: % VERNON DIXON, 2410 AVE. D, FT. PIERCE FL 34950-2756



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and Mailing Address (2a-24) details including Suite, Apt. #, City & State, Zip, and Country.

3. Date Incorporated or Qualified: 05/11/1983  
4. FEI Number: 65-0086087  
5. Certificate of Status Desired:  Yes, \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  No, \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax:  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIXON, VERNON  
2410 AVE. D  
FT. PIERCE FL 33450

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

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: *Vernon M. Dixon* DATE: 5/5/99  
(NOTE: Registered Agent signature required when reinstating)

Table 12: OFFICERS AND DIRECTORS. Includes fields for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox. Entry 1: DP DIXON, VERNON, 2410 AVE D, FT PIERCE, FL 00000.

Table 13: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition.

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, with all other like empowered.

SIGNATURE: *Vernon M. Dixon* DATE: 5/5/99 Daytime Phone #: 561-461-1010

CR2E034 (1/98)

5/11/99