## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G54841

FILED Apr 07, 2006 Secretary of State

Entity Name: DIXIE-SOUTHERN CONSTRUCTORS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2650 CR DUETTE,	39 FL 33834	US		
Current M	lailing Addı	ess:	New Mailing Addres	s:
2650 CR DUETTE,	.#39 FL 33834	US		
El Number	: 59-2311405	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address o	f Current Registered Agent:	Name and Address of	of New Registered Agent:
3757 TRA	E, GARY S. ILRIDGE DR D, FL 33813			
	e named entit e of Florida.	y submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida. RE:			d office or registered agent, or both,
n the State	e of Florida. RE:Electr	onic Signature of Registered Ag		d office or registered agent, or both,  Date
n the State	e of Florida. RE:Electr		ent	Date
n the State	e of Florida. RE:Electr	onic Signature of Registered Aging Trust Fund Contribution().	ent	
n the State	e of Florida.  RE: Electr mpaign Financ S AND DIRE	conic Signature of Registered Agring Trust Fund Contribution ( ).  CCTORS:  ( ) Delete SARY S, RIDGE DR.	ent	Date
n the State BIGNATUI Blection Car DFFICER Title: lame: ddress:	e of Florida.  RE: Electr mpaign Finance S AND DIRE  DPT CLAVILLE, G 6757 TRAILE LAKELAND,	conic Signature of Registered Agring Trust Fund Contribution ( ).  CCTORS:  ( ) Delete GARY S, RIDGE DR. FL  ( ) Delete C., JRCH ST.	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DORIS M. BILLER S 04/07/2006