

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # H44752

1. Entity Name
DIXIE FISH COMPANY, INC.



Principal Place of Business
218 S. COVE LANE
PANAMA CITY, FL 32401

Mailing Address
P.O. BOX 1225
PANAMA CITY, FL 32402



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2521649	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HAMLIN, RONALD B.
218 S. COVE LANE
PANAMA CITY, FL 32401

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when resigning)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HAMLIN, RONALD B. 100 SHERMAN AVE. PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS HAMLIN, DOROTHY 218 S. COVE LANE. PANAMA CITY, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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01/11/07-80023-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald B. Hamlin **Ronald B. Hamlin** 1-10-2007 (850) 784-0050

Date

Daytime Phone #