

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083864

FILED
Feb 12, 2009
Secretary of State

Entity Name: DIXON DURKIN KING PRIDGEN LLC

Current Principal Place of Business:

756 BALDWIN AVE
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

756 BALDWIN AVE
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

40-B HWY 181 WEST
DEFUNIAK SPRINGS, FL 32433

FEI Number: 20-1895961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAM, DOUGLAS T JR.
912 S. PALM BLVD.
SUITE E
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: DURKIN, LYDIA KAREN K
Address: 86 PEACOCK ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM () Delete
Name: KING, LYDIA C
Address: 86 PEACOCK ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM () Delete
Name: PRIDGEN, VIRGINIA D
Address: 40B, HWY 181 WEST
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM () Delete
Name: DIXON, CAROLYN
Address: PEACOCK ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: KING, LYDIA C VICE PR
Address: 86 PEACOCK ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM (X) Change () Addition
Name: PRIDGEN, VIRGINIA D SECRETA
Address: 40B, HWY 181 WEST
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM (X) Change () Addition
Name: DIXON, CAROLYN C PRESIDE
Address: 139 PEACOCK ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CAROLYN C. DIXON

PRES

02/12/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date