2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED Apr 27, 2007 08:00 AM Secretary of State DOCUMENT # L05000058129 1. Entity Name DIXIE VENTURE, LLC Principal Place of Business Mailing Address 1140 7TH COURT, SUITE E 1140 7TH COURT, SUITE E VERO BEACH FL 32961 VERO BEACH FL 32961 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc Suite. Apt. #, etc. 1st MOORE CR2E083 (10/06) City & State City & State 4. FEI Number Applied For 20-4586142 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLOCK, SAMUEL A ESQ Street Address (P.O. Box Number is Not Acceptable) 3339 CARDINAL DRIVE, SUITE 200 VERO BEACH FL 32963 Zip Code 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, typed or printed name of registered agent and into it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES HILE **MGRM** ☐ Delete HILE ☐ Change Addition NAME SHWEY, JACK J U00000737724 05/11/07-80038-025 50.00 SIDEL LADDRESS STREET ADDRESS 1140-7TH CT SUITE E CHY-ST-7/P VERO BEACH FL 32961 CHTY-ST-ZIP THEF ☐ Delete TITLE Change ☐ Addition NAME. NAME. STREET ADDRESS STREET ADORESS CITY ST-ZIP CITY-ST-ZIP Delete IIII ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE [Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY+Si-ZIP CITY-ST-71P TITLE ☐ Delete THE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete HILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this roport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the limited liability company or the receiver or trustee impowered to execute this report as required by Chapter 608. Florida Statutes.

MANAGING MEMBER

SIGNATURE:

(pil 25, 2007 - (m) 567-8745