2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065861

Entity Name: DIXIE CAPITAL, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1325 SNELL ISLE BLVD SUITE 211 ST PETERSBURG, FL 33704 US	226 5TH AVE N SUITE 1406 ST PETERSBURG, FL 33701 US
Current Mailing Address:	**New Mailing Address:**
PO BOX 7598 ST PETERSBURG, FL 33734	

FEI Number: 20-5683421   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
THE BLAKE WHITNEY THOMPSON COMPANY, LLC 1325 SNELL ISLE BLVD SUITE 211 ST. PETERSBURG, FL 33704 US	THE BLAKE WHITNEY THOMPSON COMPANY, LLC 226 5TH AVE N SUITE 1406 ST. PETERSBURG, FL 33701 US

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: _____   04/14/2009

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	SMITH, MATTHEW	Name:	SMITH, MATTHEW
Address:	420 LIDO WAY NE	Address:	1172 SEVILLE LANE NE
City-St-Zip:	ST PETERSBURG, FL 33704 US	City-St-Zip:	ST PETERSBURG, FL 33704 US

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	THE BLAKE WHITNEY THOMPSON COMPANY, LLC	Name:	
Address:	PO BOX 7598	Address:	
City-St-Zip:	ST. PETERSBURG, FL 33734 US	City-St-Zip:	

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: MATTHEW SMITH   MGRM   04/14/2009

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