

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088714

FILED
May 02, 2008
Secretary of State

Entity Name: DEBBIE DIXON INSURANCE AGENCY, LLC

Current Principal Place of Business:

4240 HWY 98 NORTH
LAKELAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

4240 HWY 98 NORTH
LAKELAND, FL 33809 US

New Mailing Address:

FEI Number: 20-5693614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SMITH, KEITH C ESQ.
121 NORTH COLLINS STREET
PLANT CITY, FL 33563 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 () Delete
Name: DIXON, DEBBIE
Address: 4240 HWY 98 NORTH
City-St-Zip: LAKELAND, FL 33809 US

Title: MGRM () Delete
Name: DIXON, DAVID W
Address: 4240 HWY 98 NORTH
City-St-Zip: LAKELAND, FL 33809 US

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
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: DEBBIE DIXON

MGRM

05/02/2008

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