

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

APPROVED
AND
FILED

98 MAY -1 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L96000000562**

DIXON/RUSSELL, L.C.
11 E. SILVER SPRINGS BLVD
OCALA FL 34471

98-AP
CM

1a. Principal Place of Business Address

11 E. SILVER SPRINGS BLVD
OCALA FL 34471

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05/13/1996

FL

City & State

City & State

4. FEI Number

59-3454932

☐ Applied For

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report

10/29/1997

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

DIXON, GABRIEL
11 E. SILVER SPRINGS BLVD
OCALA FL 34471

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

100002516581-1

-05/08/98--01012--015

****188.75 ****188.75

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

Gabriel Dixon

DATE

4-29-98

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	DIXON, GABRIEL	11 E. SILVER SPRINGS BLVD	OCALA FL 34471
MGR	RUSSELL, MARY	11 E. SILVER SPRINGS BLVD	OCALA FL "
MGR	RUSSELL, BRIAN	11 E. SILVER SPRINGS BLVD	OCALA FL "

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Brian Russell, BRIAN RUSSELL

4-29-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #