File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 99 APR -8 PM 1: 36 FILING FEE | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Mailing Address
of Limited Liability Company **DOCUMENT # L96000000562** 1a. Principal Place of Business Address DIXON/RUSSELL, L.C. 11 E. SILVER SPRINGS BLVD 11 E. SILVER SPRINGS BLVD OCALA FL 34471 OCALA FL 34471 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 05/13/1996 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3454932 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Žιρ Country Country \$8.75 Additional Fee Required 05/01/1998 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office DIXON, GABRIEL 11 E. SILVER SPRINGS BLVD Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34471 Suite, Apt. #, etc City Zip Code 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE \_ (B) Interest April An extensive Applications of the Boy Sound April September 6. Managing Members/Managers 10. Title **Business Street Address** City, State and Zip Code MGR DIXON, GABRIEL 11 E. SILVER SPRINGS BLVD OCALA FL MGR RUSSELL, MARY 11 E. SILVER SPRINGS BLVD OCALA FL MGR RUSSELL, BRIAN 11 E. SILVER SPRINGS BLVD OCALA FL edoco2844798----04720739--01036~-004 \*\*\*\*188,75 \*\*\*\*188.79 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: