## **2006 LIMITED LIABILITY COMPANY** ANNUAL REPORT

## **DOCUMENT # M00000001808**

1. Entity Name DIXIE INVESTORS, LLC



Principal Place of Business

Mailing Address

4415 PHEASANT RIDGE ROAD, SW, STE. 300 ROANOKE, VA 24014

4415 PHEASANT RIDGE ROAD, SW, STE. 300 ROANOKE, VA 24014

## **FILED** Jul 17, 2006 8:00 am **Secrétary of State**

07-17-2006 90044 026 \*\*\*\*50.00

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07062006 No Chg-LLC DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 54-1962349 Not Applicable \$5.00 Additional 

5. Certificate of Status Desired

Fee Required

540-772-6329

CR2E083 (11/05)

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

7/10/06

the obligations of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by September 6, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, JAMES R 4415 PHEASANT RIDGE RD., STE 303 ROANOKE, VA 24014		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT V	VRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 on the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE