2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2011
Secretary of State

DOCUMENT# N10000004263

Entity Name: ANDREW DIXON FOUNDATION, INC.

Current Principal Place of Business:

505 CLEAR RD
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

505 CLEAR RD
OCALA, FL 34472

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DIXON, ANDREW
505 CLEAR RD
OCALA, FL 34472 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

OFFICERS AND DIRECTORS:

Title: PD
Name: DIXON, ANDREW
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

Title: TD
Name: DIXON, YVONNE
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

Title: SD
Name: DIXON-WARD, FELICIA
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

Title: D
Name: HAYLES, ANDREW
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

Title: D
Name: WALKER, MATTHEW
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

Title: D
Name: SURRENCY, TIM
Address: 505 CLEAR RD
City-St-Zip: OCALA, FL 34472

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREW DIXON PRES 03/21/2011
Electronic Signature of Signing Officer or Director Date