


FILE NOW: FILING FEE IS \$61.25

FILED
Jun 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N30245** (7)

1. Corporation Name

DIXIE FARMS HOMEOWNERS ASSOCIATION, INC.

TALLAHASSEE FLORIDA



Principal Place of Business RT 4 BOX 2478 HAVANA FL 32333	Mailing Address RT 4 BOX 2478 HAVANA FL 32333-9613
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3. Date Incorporated or Qualified 01/18/1989	3a. Date of Last Report 06/04/1996
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 59-3022255	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent DEBORAH L EVANS RT 4 BOX 2470 HAVANA FL 32333	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Deborah L. Evans* **Deborah L. Evans, Treasurer** DATE

12. OFFICERS AND DIRECTORS	
TITLE	DP <input checked="" type="checkbox"/> DELETE
NAME	BENNETT, TONY
STREET ADDRESS	RT 4, BOX 2472
CITY-ST-ZIP	HAVANA FL 32333
TITLE	DV <input checked="" type="checkbox"/> DELETE
NAME	JACKSON, JIMMIE JR
STREET ADDRESS	RT 4, BOX 2473 N/A
CITY-ST-ZIP	HAVANA FL
TITLE	DST <input checked="" type="checkbox"/> DELETE
NAME	DEBORAH EVANS
STREET ADDRESS	RT 4, BOX 2470
CITY-ST-ZIP	HAVANA FL 32333
TITLE	S <input type="checkbox"/> DELETE
NAME	EVANS, DEBORAH
STREET ADDRESS	P.O. BOX 2395 N/A
CITY-ST-ZIP	HAVANA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Tauno Kyllonen, Jr.
1.3 STREET ADDRESS	4012 Chipola Street
1.4 CITY-ST-ZIP	Tallahassee FL 32303
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	400002220324--0
2.3 STREET ADDRESS	-06/23/97--01160--001
2.4 CITY-ST-ZIP	*****70.00 *****70.00
3.1 TITLE	DS <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Dianne Ice
3.3 STREET ADDRESS	Rt 4, BOX 2474
3.4 CITY-ST-ZIP	Havana FL 32333
4.1 TITLE	DT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Deborah Evans
4.3 STREET ADDRESS	Rt 4 Box 2470
4.4 CITY-ST-ZIP	Havana FL 32333
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CP2E037 (9/96)