

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108046

Entity Name: DIXIE ROOFING & STUCCO, INC.

FILED
Jan 20, 2005
Secretary of State

Current Principal Place of Business:

6130 S BROAD ST, LOT #81
BROOKSVILLE, FL 34601

New Principal Place of Business:

901 HAMMOCK RD.
BROOKSVILLE, FL 34601

Current Mailing Address:

P O BOX 10831
BROOKSVILLE, FL 34603

New Mailing Address:

FEI Number: 59-3687254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GODWIN, WILLIAM N
8869 W SPRING COVE RD
HOMOSASSA, FL 34448 US

Name and Address of New Registered Agent:

GODWIN, WILLIAM N
933 HOWELL AVE.
BROOKSVILLE, FL 34601 US

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

01/20/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GODWIN, WILLIAM N
Address: 8869 W SPRING COVE RD
City-St-Zip: HOMOSASSA, FL 34601

Title: VD () Delete
Name: SMITH, LAWRENCE E
Address: 901 HAMMOCK RD
City-St-Zip: BROOKSVILLE, FL 34601

Title: SD () Delete
Name: HARWOOD, SCOTT T
Address: 912 HAMMOCK RD
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GODWIN, WILLIAM N
Address: 933 HOWELL AVE
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE E. SMITH

VD

01/20/2005

Electronic Signature of Signing Officer or Director

Date