2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064691

FILED Mar 16, 2004 Secretary of State

Entity Name: LIVINGSTON ENTERPRISES OF DIXIE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

HIGHWAY 351 AND 4TH AVENUE WEST 110 MAIN STREET PO BOX 248 PO BOX 248

HORSESHOE BEACH, FL 32648 HORSESHOE BEACH, FL 32648

Current Mailing Address: New Mailing Address:

PO BOX 248

HORSESHOE BEACH, FL 32648

FEI Number: 59-3726701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIVINGSTON, SUSAN J

CORNER OF HIGHWAY 351AND 4TH AVENUE WEST

HORSESHOE BEACH, FL 32648

LIVINGSTON, SUSAN J 110 MAIN STREET HORSESHOE BEACH, FL 32648

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: 03/16/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete LIVINGSTON, SUSAN J Name:

CORNER OF HIGHWAY 351 AND 4TH AVENUE WEST Address:

City-St-Zip: HORSESHOE BEACH, FL 32648

Title: () Delete Name: LIVINGSTON, JAMES L

CORNER OF HIGHWAY 351 AND 4TH AVENUE WEST Address:

City-St-Zip: HORSESHOE BEACH, FL 32648 Title: (X) Change () Addition

LIVINGSTON, SUSAN J Name: Address: 110 MAIN STREET

City-St-Zip: HORSESHOE BEACH, FL 32648

Title: (X) Change () Addition

LIVINGSTON, JAMES L Name:

Address: 110 MAIN STREET

HORSESHOE BEACH, FL 32648 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: SUSAN J LIVINGSTON **PST** 03/16/2004