

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000132182

Entity Name: RICKEY CAMERON DIX, SR., INC.

**FILED**  
**Mar 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

108 LAUREL OAK ST.  
MELBOURNE, FL 329121569

**New Principal Place of Business:**

2424 BURNS AVE  
MELBOURNE, FL 32935

**Current Mailing Address:**

P.O. BOX 121569  
MELBOURNE, FL 329121569

**New Mailing Address:**

FEI Number: 52-2446328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DIX, MARY LOUISE  
108 LAUREL OAK ST.  
WEST MELBOURNE, FL 32904 US

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

DIX, MARY LOUISE  
2424 BURNS AVE  
MELBOURNE, FL 32935 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: MARY L DIX

03/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: DIX, RICKEY C SR.  
Address: P.O. BOX 121569  
City-St-Zip: MELBOURNE, FL 329121569

Title: VSD  
Name: DIX, MARY LOUISE  
Address: P.O. BOX 121569  
City-St-Zip: MELBOURNE, FL 329121569

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICKEY C DIX SR.

PRES

03/12/2011

Electronic Signature of Signing Officer or Director

Date