

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Nov 19, 2008
Secretary of State**

DOCUMENT# P07000043766

Entity Name: DIXIE BELLES CAFE, INC.

Current Principal Place of Business:

7125 SOUTH ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

7125 SOUTH ORANGE AVE
ORLANDO, FL 32809 US

Current Mailing Address:

1120 SOUTH SANFORD AVENUE
SANFORD, FL 32771

New Mailing Address:

1120 SOUTH SANFORD AVENUE
SANFORD, FL 32771 US

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

Name and Address of Current Registered Agent:

SEAVER, MARK B
1120 SOUTH SANFORD AVENUE
SANFORD, FL 32771 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: PT () Delete
Name: SEAVER, MARK B
Address: 1120 SOUTH SANFORD AVENUEE
City-St-Zip: SANFORD, FL 32771

Title: VP () Delete
Name: HIGGINS, CARRIE J
Address: 4612 STILWELL DR
City-St-Zip: ORLANDO, FL 32812

Title: VP (X) Delete
Name: COLLINS, THERESA A
Address: 4024 MONTROSE CT
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SEAVER, MARK B
Address: 1120 SOUTH SANFORD AVENUEE
City-St-Zip: SANFORD, FL 32771

Title: VP (X) Change () Addition
Name: BELANGER, NANCY J
Address: 1915 MELVIN AVENUE
City-St-Zip: ORLANDO, FL 32806 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK SEAVER

PD

11/19/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date