

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000010965

Entity Name: DIXIE TREATS, INC.

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4541 FORSYTH STREET  
BAGDAD, FL 32530

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 148  
BAGDAD, FL 32530

**New Mailing Address:**

FEI Number: 26-4172484

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JACOBS, DEBORAH W  
4541 FORSYTH STREET  
BAGDAD, FL 32530 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: P  
Name: JACOBS, KENT L  
Address: 4541 FORSYTH STREET  
City-St-Zip: BAGDAD, FL 32530

Title: VP  
Name: JACOBS, DEBORAH W  
Address: 4541 FORSYTH STREET  
City-St-Zip: BAGDAD, FL 32530

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: DEBORAH JACOBS

VP

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date