

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000036148

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** C.G. DIXON & ASSOCIATES, INC.

**Current Principal Place of Business:**

16120 N FLORIDA AVE, SUITE 20  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

16120 N FLORIDA AVE, SUITE 20  
LUTZ, FL 33549

**New Mailing Address:**

30477 USF HOLLY DRIVE  
TAMPA, FL 33620

**FEI Number:** 68-0680523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIXON, CHARLOTTE G  
16120 N FLORIDA AVE, SUITE 20  
LUTZ, FL 33549 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: CHARLOTTE G. DIXON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DR.  
Name: DIXON, CHARLOTTE G  
Address: 16120 N FLORIDA AVE, SUITE 20  
City-St-Zip: LUTZ, FL 33549

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: CHARLOTTE G. DIXON

DR.

01/03/2012

Electronic Signature of Signing Officer or Director

Date