

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000078439

1. Entity Name
KITDIC INVESTMENTS, INC.



Principal Place of Business
**4800 NORTH PALAFOX ST.
PENSACOLA, FL 32503**

Mailing Address
**P O BOX 6038
PENSACOLA, FL 32503 US**

DO NOT WRITE IN THIS SPACE



03052006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3210439

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DICKERSON, F O
4800 NORTH PALAFOX ST.
PENSACOLA, FL 32503**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YON, ELIZABETH D
STREET ADDRESS	5219 PINE STRAW RD
CITY-ST-ZIP	COLUMBIA, SC
TITLE	D
NAME	DICKERSON, JAMES H
STREET ADDRESS	2830 BELLE CHRISTIAN
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	D
NAME	DICKERSON, WILLIAM,
STREET ADDRESS	120 SEAMARGE CIRCLE
CITY-ST-ZIP	PENSACOLA, FL 32507
TITLE	D
NAME	RENFROE, JAN D
STREET ADDRESS	4185 BAISDEN RD.
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	D
NAME	MAJOR, LAURA D
STREET ADDRESS	2467 MAGNOLIO AVE.
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	PD
NAME	DICKERSON, F O
STREET ADDRESS	402 W. LLOYD ST.
CITY-ST-ZIP	PENSACOLA, FL 32501

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04/17/06-80029-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: F.O. Dickerson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06

(850) 434-1001

Daytime Phone