

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90156 037 ***150.00

DOCUMENT # P94000017043

1. Corporation Name
ESI DIXIE VALLEY, INC.

Principal Place of Business
700 UNIVERSE BLVD
JUNO BEACH FL 33408

Mailing Address
ATTN: FRANCES M. CARPENTER
700 UNIVERSE BLVD
JUNO BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1994

4. FEI Number

65-0477780

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

7. Trust Fund Contribution ☐ See Attached
8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

LEON, J. E
9250 W. FLAGLER STREET
MIAMI FL 33174

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DV	XX DELETE
NAME	CARPENTER, LARRY K	
STREET ADDRESS	11760 US HWY ONE, #600	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	DP	XX DELETE
NAME	GELBER, LESLIE J	
STREET ADDRESS	11760 US HWY ONE, #600	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	BOYLAN, PETER	
STREET ADDRESS	11760 US HWY 1, SUITE 600	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CARPENTER, FRANCES M	
STREET ADDRESS	11760 US HWY ONE, #600	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	HATHAWAY, SCOT C	
STREET ADDRESS	11760 US HWY 1, SUITE 600	
CITY-ST-ZIP	N. PALM BEACH FL 33408	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	TANCER, EDWARD F	
STREET ADDRESS	11760 US HWY 1, SUITE 600	
CITY-ST-ZIP	N. PALM BEACH FL 33408	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	YACKIRA, MICHAEL W	
1.3 STREET ADDRESS	700 UNIVERSE BLVD	
1.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	GRANT, DERREL A	
2.3 STREET ADDRESS	700 UNIVERSE BLVD	
2.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	700 UNIVERSE BLVD	
3.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS	700 UNIVERSE BLVD	
4.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
5.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	700 UNIVERSE BLVD	
5.4 CITY-ST-ZIP	JUNO BEACH FL 33408	
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS	700 UNIVERSE BLVD	
6.4 CITY-ST-ZIP	JUNO BEACH FL 33408	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frances M. Carpenter 2/18/99 (561) 691-7171

Date

Daytime Phone #

0325009

CR2E034 (11/98)

389712-90156-37

#P94000017043

ADDENDUM TO 1999 FLORIDA ANNUAL REPORT SECTION 13

ESI DIXIE VALLEY, INC.

DOCUMENT #94000017043

TITLE: D
NAME: HOFFMAN, KENNETH P
STREET ADDRESS: 700 UNIVERSE BLVD
JUNO BEACH FL 33408

TITLE: AS
NAME: PONDER, STEPHEN H
STREET ADDRESS: 700 UNIVERSE BLVD
JUNO BEACH FL 33408

SECTION 8

INTANGIBLE TAX IS PAID BY PARENT COMPANY, FPL GROUP, INC.,
FEI #59-2449419