

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045326 (3)

1. Corporation Name

DIXON III, INC.



Principal Place of Business

12 VIA DELUNA DRIVE #404
PENSACOLA BEACH FL 32561

Mailing Address

12 VIA DELUNA DRIVE #404
PENSACOLA BEACH FL 32561

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

59-3251375

Not Applicable

22

City & State

27

City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

Zip

Country

28

Zip

Country

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DIXON, JAMES O JR
12 VIA DELUNA DRIVE #404
PENSACOLA BEACH FL 32561

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 JAMES O. DIXON JR
Signature, typed or printed name of registered agent and title if applicable

James O. Dixon Jr
(NOTE: Registered Agent signature required when installing)

7/29/98
DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME DIXON, JAMES O JR
STREET ADDRESS 12 VIA DE LUNA DR. #404
CITY-ST-ZIP PENSACOLA FL 32561

☐ DELETE

TITLE VT
NAME HAWKINS, ALBERT L JR
STREET ADDRESS 4149 ALEXANDER
CITY-ST-ZIP GULF BREEZE FL 32561

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

300002627413
-08/28/98--01028--024
***150.00

☐ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE: James O. Dixon Jr

7/29/98 (850)932-6100

CR2E034 (5/98)

Handwritten initials: JF-2

Dixon III, Inc.

Chamber of Commerce Internet Site Providers

SantaRosaCounty.com ~ GulfBreezeFL.com ~ NavarreBeachFL.com ~ PensacolaBeachFL.com ~ MiltonFL.com

P.O. Box 1183

Gulf Breeze, FL 32562

(904) 932-6100

Fax 932-0010

July 28, 1998

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Sirs:

I have enclosed two checks, one for the Annual Report and Corporation Supplemental fees, and a second for a late penalty.

I have searched my files and consulted with my CPA, and the original notice did not arrive, or if it did, I did not see it and my CPA did not. Since the last report, I have closed the office and laid off all the employees but one.

In view of the circumstances, I hope you will agree to accept the \$50 as an equitable late fee. I would like to continue the business if at all possible, and will greatly appreciate your understanding and forbearance.

Sincerely,,

Handwritten signature of Jim Dixon

Jim Dixon
President
Dixon III, Inc.