

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90134 043 ***150.00

DOCUMENT # P96000024089

1. Entity Name
DIX . NANCE, INC.

Principal Place of Business

**150 W. JESSUP AVENUE
 LONGWOOD FL 32750**

Mailing Address

**150 W. JESSUP AVENUE
 LONGWOOD FL 32750**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3368091

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIX, JEFFREY C
 150 W. JESSUP AVE.
 LONGWOOD FL 32750**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIX, JEFFREY C 1120 SCENIC POINT RD LONGWOOD FL 32750	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV NANCE, CHRISTINA E 204 SWEETWATER COVE BLVD. N. LONGWOOD FL 32779	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T O'CONNOR, GAIL E. 1311 MYRTLE DRIVE LONGWOOD FL 32750	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DIX, DEBORAH K. 1120 SCENIC POINT ROAD LONGWOOD FL 32750	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV NANCE, CHRISTINA E 338 SPRING RUN CIRCLE LONGWOOD FL 32779	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

CHRISTINA NANCE
VICE PRESIDENT 2-11-02

Date

Daytime Phone #

407 667 1777

CR2E034 (9/01)