

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000097058

Entity Name: DICKSON & SONS, INC.

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

9819 COMPASS PT WAY
TAMPA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 23392
TAMPA, FL 33623392 US

New Mailing Address:

FEI Number: 59-3418964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, W.C.
1517 COMMERCIAL PARK DRIVE
LAKELAND, FL 33801 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DICKSON, JAMES F
Address: P O BOX 23392 N/A
City-St-Zip: TAMPA, FL 92

Title: VSTD () Delete
Name: DICKSON, TODD J
Address: P O BOX 23392 N/A
City-St-Zip: TAMPA, FL 92

Title: VD () Delete
Name: DICKSON, MARY B
Address: P O BOX 23392 N/A
City-St-Zip: TAMPA, FL 92

Title: VD () Delete
Name: DICKSON, JOHN
Address: P O BOX 23392 N/A
City-St-Zip: TAMPA, FL 92

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JAMES F DICKSON

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date