## 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

## DOCUMENT # P9700005728

1. Corpo ation Name

DIXIE FLIGHT CO.

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90196 042 \*\*\*150.00



Principal Place	of Business	Mailing Address	"-	( (diliber (to lili) idit) best ditter	8 MILL MOIDI BINE 1881	14901 4811 1981	
10401 MILEIURN LANE 10401 MILBURN LANE							
BOCA RATON FL 33498		BOCA RATON FL 33498		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE		
j				3 Date Incorporated or Qualifed	THIS SPACE		
				01/21/1997			
2. Principal Pla	ace of Business	2a, Mailing Address		4. FEI Number	Ar	plied For	
	Air Way Street	26 12908 Air V	Vav Street	65-0728252	<u> </u>	t Applicable	
Suite, /\pt. #, etc.		Suite, Apt. #, etc.			\$8.75	Additional	
27		27		5. Certif ate of Status Desired	Fee Re	quired	
City & State		City & State		6, Election Campaign Financing			
23 Panama City, FL		Panama City, FL		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year			
24 32404		29 32404-2833 3	U.S.A.	Personal Property Tax.  10. Name and Address of New Registe	Yes	□No	
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registr	er su Agent		
Judith C. Young							
10401 MILBURN LANE			82 Street Add	lress (P.O. Bo ← Number is Not Acceptable)		İ	
BOCA RATON FL 33498			83	08 Air Way Street			
				ama City			
	_		84 City	•	<b>F</b> 1 85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered							
office or registered agent, or bc th, in the State of Florida Statutes and authorized by the corporation's board of directors. I hereby accept the ap pointment as registered agent. I am (amiliar with, and a copt the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE Signature type of philipports the old objected agent and are processed by the signature required when reinstating)  DATE  DATE							
12.	OFFICERS AN	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER			
TITLE	P\$T	<b>□</b> DEVETE	LATIME D	/P	[X] Change	☐ Addition	
NAME	Libbers, arthur J		1.2 NAME	idith C. Young 2908 Air Way Street	•		
STREET ADDRESS	10401 MILBURN LANE		1,0 01111111111111111111111111111111111		00404		
CITY-ST-ZIP	BOCA RATON FL 33498			anama City, Florida		FT A Little	
TITLE	VP	[ <u></u> ≱0ELETE		P/S/T_		☐ Addition	
NAME	YOUNG, JUDITH C			avid F. Young			
STREET ADDRESS	12908 AIR WAY ST			2908 Air Way Street	00404	)	
CITY-ST-ZIP	PANAMA CITY FL 32404	C DELETE		anama City, Florida	32404 (X)Change	Addition	
) TITLE		☐ DELETE	3.1 TITLE VI	•	TT CHRINGE		
NAME			3.2 NAME DO	on Collova 2908 Air Way Street			
STREET ADDRE 3S			De	anama City, Florida	32404		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP P 2	mana oroy, rrorra	☐ Change	Addition	
TITLE		FT DEFEIG	4.1 MAE				
NAME STREET ADDRESS			4.2 NAMIC 4.3 STREET ADDRESS				
			4.4 CITY-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		Change	Addition	
NAME		<b>—</b>	5.2 NAME		_		
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			54 CITY-ST-ZIP	_			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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 armitted report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made unlier oath; that I am an officer or director of the curporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Young Director/President