

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000018123

FILED
Apr 30, 2004
Secretary of State

Entity Name: SCOTT C. DIXON, P.A.

Current Principal Place of Business:

1800 W HIBISCUS BLVD #124
MELBOURNE, FL 32901

New Principal Place of Business:

2202 SOUTH BABCOCK STREET
200
MELBOURNE, FL 32901

Current Mailing Address:

1800 W HIBISCUS BLVD #124
MELBOURNE, FL 32901

New Mailing Address:

2202 SOUTH BABCOCK STREET
200
MELBOURNE, FL 32901

FEI Number: 59-3500235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, SCOTT C
1371 CATHEDRAL OAK DRIVE
PALM BAY, FL 32907

Name and Address of New Registered Agent:

DIXON, SCOTT C
2202 BABCOCK STREET
200
MELBOURNE, FL 32901

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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIXON, SCOTT C
Address: 1800 W HIBISCUS BLVD #124
City-St-Zip: MELBOURE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIXON, SCOTT C
Address: 2202 SOUTH BABCOCK STREET, SUITE 200
City-St-Zip: MELBOURNE, FL 32901

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: SCOTT C. DIXON

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date