PROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEFAR MENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

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CTARY BEISTATE.

DUCUMENT # P98000033871 DIXON DESIGN ASSOCIATES, INC.					TALLAR ASSECT FLORIDA			
		· •		V	of burger above			
Principal Pla	ce of Business	Mailing Address						
		2478 KINGSMILL AVENUE MELBOURNE FL 32834			DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualified 04/13/1998	THE OFFICE		
2. Principal Place of Business		2a. Mailing Address	¬ ·		4. FEI Number 59 - 351 7445		oplied For ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	•	Additional equired		
City & State		City & State .		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
Zip [أسر	Country 25	Zip 3	Country	•	This corporation owes the current year Personal Property Tax.	r Intangible	X ₀	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Register	red Agent		
DIXON, WINONA J 2476 KINGSMILL AVENUE MELBOURNE FL 32934				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83				
_			84	City		EL 85 Zip (Code	
office or	registered agent, or both, in the Si	.0502 and 607.1508, Florida Statutes, tate of Florida. Such change was auth aligations of, Section 607.0505, Florida	norized by	the corporat	poration submits this statement for the purposion's board of directors. I hereby accept the ap-	of changing its pointment as rep	registered gistered	
SIGNATURE	Signature, typed or printed name of registere	agent and little if applicable. (NOTE: Re	gistered Ager	it signatura requir	ed when reinstating) DATE			
12.		AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
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NAME	DIXON, WINONA J	1.2 N		- 1				
STREET ADDRESS				ADDRESS	•		-	
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· · · · .			22 NAME					
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- <u>57.29</u>	······································	DELETE	2.4 CITY-S	1.ZP		Change	Additic	
-	1		12 NAME					
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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 17 of changed, or on an attachment with, address, with all other "the empowered."

3.4. CITY-ST-ZIP

41TMLE 4.2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME **5.3 STREET ADDRESS**

6.1 TITLE

6.2 NAME **6.3 STREET ADORESS** 8.4 CITY-ST-ZIP

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804 EAST PALMETTO AVENUE MELBOURNE, FLORIDA 32901 TELEPHONE: 407-725-2057 FLORIDA LICENSE 6102

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ATTACHMENT PAGE 2012 199000033971, 199000033971, 199000033971

DIXON DESIGN ASSOCIATES, INC.

ARCHITECTURE - PLANNING - INTERIOR DESIGN

August 1, 2000

Division of Corporations Annual Reports Filings PO Box 1500 Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Enclosed is a check for the amount of \$150,00. During the time when this corporation filing was due I suffered a number of illeness and was absent from my office a great deal of time. Consequently the form was mislaid and I still cannot find it.

I run a small one man office in a small town and my annual revenue is also small. A \$400.00 late filing penalty in what is to be a poor year will seriously impact the well being of this corporation.

I am therefore requesting that the late filing penalty be waived this year. I have finally gotten control of this office and an oversight like this shall never happen again.

I thank you for your indulgence in this matter and I await your reply.

Yours very truly, DIXON DESIGN ASSOCIATES, INC.

Faurence M. Dif

LAWRENCE M. DIXON, SECRETARY