## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## May 01, 2007 08:00 AM Secretary of State DOCUMENT #V29814 1. Entity Name MIXON & SONS, INC. Principal Place of Business Mailing Address 94 READY AVENUE 93 EAST KATHY LANE FT. WALTON BEACH, FL 32548 FREEPORT, FL 32439 US 04242007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3127270 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent STEVEN E MIXON DO NOT WRITE 93 EAST KATHY LANE FREEPORT, FL 32439 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS CPTD TITLE NAME STEVEN E MIXON STREET ADDRESS 93 EAST KATHY LANE U00000752945 05/22/07-80001-001 150.00 CITY-ST-ZIP FREEPORT, FL 32439 VSD TITLE NAME MIXON, MICHAEL D. STREET ADDRESS 600 LOMBARD CIRCLE CITY-ST-ZIP FORT WALTON BEACH, FL 32548 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TIT! F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thunk Mya STEVENE. MIKON. 4-24-07 (950)897-7585

CITY-ST-ZIP