

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000036972

**Entity Name:** 17220 SOUTH DIXIE, INC.

**Current Principal Place of Business:**

17220 S DIXIE HWY  
PERRINE, FL 33157-4351

**Current Mailing Address:**

P.O.BOX 1454  
PROVIDENCE, RI 02901

**FEI Number:** 04-2699699

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KESHEN, NELSON C  
TWO DATRAN CENTER STE 1511  
9130 S DADELAND BLVD  
MIAMI, FL 33156 US

*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

**Officer/Director Detail :**

Title            PTD  
Name            WIGGINGS, TREVOR J  
Address        615 RESERVOIR AVE  
City-State-Zip: CRANSTON RI 02910

Title            S  
Name            STOLER, JEFFREY  
Address        225 FRANKLIN ST  
City-State-Zip: BOSTON MA 02110

Title            AS  
Name            WILMOT, MARK A  
Address        138 ATWELLS AVE  
City-State-Zip: PROVIDENCE RI 02903

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARK A. WILMOT

AS

04/13/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date