2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005 08:00 AM
Secretary of State

DOCUMENT # 810893

1. Entity Name
NOLAND COMPANY

Principal Place of Business	Mailing Address
ATTN TAX ADMINISTRATOR 2700 WARWICK BLVD NEWPORT NEWS, VA 23607	ATTN TAX ADMINISTRATOR 2700 WARWICK BLVD NEWPORT NEWS, VA 23607

DO NOT WRITE IN THIS SPACE

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number
54-0320170
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ALLEN, THOMAS N
STREET ADDRESS	1420 EAST COMMERCE ROAD
CITY-ST-ZIP	RICHMOND, VA
TITLE	TS
NAME	WELBORN, RICHARD L
STREET ADDRESS	8 MAYER COURT
CITY-ST-ZIP	HAMPTON, VA 23664
TITLE	D
NAME	GAMBILL, MARK
STREET ADDRESS	1210 E. CARY STREET, SUITE 300
CITY-ST-ZIP	RICHMOND, VA 23219
TITLE	D
NAME	GOOLSBY, A.C., III
STREET ADDRESS	9 STONEHURST GREEN
CITY-ST-ZIP	RICHMOND, VA
TITLE	VD
NAME	HENDERSON, A P
STREET ADDRESS	13 FLAX MILL ROAD
CITY-ST-ZIP	NEWPORT NEWS, VA
TITLE	CD
NAME	NOLAND, LLOYD U
STREET ADDRESS	3 MERRY CIRCLE
CITY-ST-ZIP	NEWPORT NEWS, VA 23606

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01/11/05-80056-007 150.00

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12. 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 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: Richard Welborn Richard L Welborn 1/6/05 757-928-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #