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Jan 23 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 821028 (8)  
1. Corporation Name  
JOHN MORRELL & CO.



Principal Place of Business: C/O TAX DEPARTMENT 250 E FIFTH ST. 27TH FL CINCINNATI OH 45202

Mailing Address: P.O. BOX 449 250 E FIFTH ST. 27TH FL SMITHFIELD VA 23431-0449 US

3. Date Incorporated or Qualified: 12/29/1967  
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business  
21 805 East Kemper Rd.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 P.O. Box 449  
Suite, Apt. #, etc.

4. FEI Number: 36-2332471  
Applied For: Not Applicable

22 City & State: Cincinnati, OH

27 City & State: Smithfield, VA

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

23 Zip: 45246-2515 Country

28 Zip: 23431-0449 Country

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

24 45246-2515 25 Country

29 23431-0449 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEBRING, JOSEPH B	1.2 NAME	
STREET ADDRESS	250 E FIFTH ST	1.3 STREET ADDRESS	805 E. Kemper Rd., Cincinnati, OH 45246
CITY-ST-ZIP	CINCINNATI OH 45202	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRUB, AARON D.	2.2 NAME	
STREET ADDRESS	999 WATERSIDE DRIVE, SUITE 900	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORFOLK VA	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUTER, JOSEPH W. III	3.2 NAME	
STREET ADDRESS	999 WATERSIDE DRIVE, SUITE 900	3.3 STREET ADDRESS	
CITY-ST-ZIP	NORFOLK VA	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	Director/Chairman & CEO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NIELSON, JOHN O.	4.2 NAME	Lewis R. Little
STREET ADDRESS	999 WATERSIDE DRIVE, SUITE 900	4.3 STREET ADDRESS	501 N. Church St.
CITY-ST-ZIP	NORFOLK VA	4.4 CITY-ST-ZIP	Smithfield, VA 23430
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 and dates 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 13 if changed, or on an attachment with an address.

SIGNATURE:   
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: AARON D. TRUB  
Date: 1-10-96  
Daytime Phone #: 757-365-3004  
0498955

CR2E034 (9/96)