

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 821028

FILED  
Feb 08, 2002 8:00 AM  
Secretary of State

Entity Name: JOHN MORRELL & CO.

**Current Principal Place of Business:**

805 E KEMPER RD  
CINCINNATI, OH 452462515 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SECRETARY  
200 COMMERCE ST  
SMITHFIELD, VA 23430 US

**New Mailing Address:**

FEI Number: 36-2332471      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

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

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SEBRING, JOSEPH B  
Address: 805 E KEMPER RD  
City-St-Zip: CINCINNATI, OH

Title: SD ( ) Delete  
Name: COLE, MICHAEL H  
Address: 200 COMMERCE ST  
City-St-Zip: SMITHFIELD, VA 23430

Title: TD ( ) Delete  
Name: POPE, C L  
Address: 200 COMMERCE ST  
City-St-Zip: SMITHFIELD, VA 23430

Title: VP ( ) Delete  
Name: BREEN, DONALD J  
Address: 805 E KEMPER RD  
City-St-Zip: CINCINNATI, OH

Title: AS ( ) Delete  
Name: BUTLER, LISA A  
Address: 200 COMMERCE STREET  
City-St-Zip: SMITHFIELD, VA 23430

Title: AS ( ) Delete  
Name: STEVENS, DANIEL E  
Address: 200 COMMERCE ST  
City-St-Zip: SMITHFIELD, VA 23430

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LISA R. BUTLER

AS

02/08/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date