FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 10 PM 12:49

DOCUMENT # **834803** **(9)**

1. Corporation Name
BEN HOGAN CO.

Principal Place of Business	Mailing Address
8000 VILLA PARK DRIVE RICHMOND VA 23228	P.O. BOX 15006 RICHMOND VA 23228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/06/1975	05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 54-1625645 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City **FL** 85 Zip Code

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
Signature, typed or printed name of registered agent and title if applicable. (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	P/D	☑ Change ☐ Addition
NAME	MCCAMMON, JOHN B	1.2 NAME	GORMAN, GEOFFREY W.	
STREET ADDRESS	8000 VILLA PARK DRIVE	1.3 STREET ADDRESS	8000 VILLA PARK DRIVE	
CITY-ST-ZIP	RICHMOND VA	1.4 CITY-ST-ZIP	RICHMOND, VA 23228	
TITLE	D	2.1 TITLE	DELETE!	☑ Change ☐ Addition
NAME	KNISELY, PHILIP W	2.2 NAME		
STREET ADDRESS	88000 AMF DR	2.3 STREET ADDRESS		
CITY-ST-ZIP	RICHMOND VA	2.4 CITY-ST-ZIP		
TITLE	V	3.1 TITLE	V/D	☑ Change ☐ Addition
NAME	ARMSTRONG, BEVERLEY W	3.2 NAME		
STREET ADDRESS	901 EAST CARY STREET, #1400	3.3 STREET ADDRESS		
CITY-ST-ZIP	RICHMOND VA 23219	3.4 CITY-ST-ZIP		
TITLE	V	4.1 TITLE	V/S	☑ Change ☐ Addition
NAME	MCCORMACK, DANIEL M	4.2 NAME		
STREET ADDRESS	901 EAST CARY STREET, #1400	4.3 STREET ADDRESS		
CITY-ST-ZIP	RICHMOND VA	4.4 CITY-ST-ZIP	ZIP = "23219"	
TITLE	VS	5.1 TITLE	Assistant Secretary	☑ Change ☐ Addition
NAME	TOY, CHERYLE K	5.2 NAME		
STREET ADDRESS	901 EAST CARY STREET, #1400	5.3 STREET ADDRESS		
CITY-ST-ZIP	RICHMOND VA	5.4 CITY-ST-ZIP	ZIP = "23219"	
TITLE	T	6.1 TITLE	T	☑ Change ☐ Addition
NAME	REED, BRYAN B	6.2 NAME	DENDTLER, E. STEWART	
STREET ADDRESS	8000 VILLA PK DR	6.3 STREET ADDRESS	8000 VILLA PARK DRIVE	
CITY-ST-ZIP	RICHMOND VA	6.4 CITY-ST-ZIP	RICHMOND, VA 23228	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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: E. Stewart Dendtler (STEWART DENDTLER) 2/27/95 804-262-3000
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR — Date — Daytime Phone #

0477466 FP