

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **834803** (9)
1. Corporation Name
BEN HOGAN CO.



Principal Place of Business
**8000 VILLA PARK DRIVE
RICHMOND VA 23228**

Mailing Address
**P.O. BOX 15006
RICHMOND VA 23228**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
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3. Date Incorporated or Qualified **08/06/1975**
3a. Date of Last Report **03/10/1995**
4. FEIN Number **54-1625645**
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
10. Name and Address of New Registered Agent

9. Name and Address of Current 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
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.07(2) 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 607.0506, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent of the corporation.

Signature of the person who is the president or officer of the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	GORMAN, GEOFFREY W	
STREET ADDRESS	8000 VILLA PARK DRIVE	
CITY-STATE-ZIP	RICHMOND VA	
TITLE	VD	☐ DELETE
NAME	ARMSTRONG, BEVERLEY W	
STREET ADDRESS	901 EAST CARY STREET, #1400	
CITY-STATE-ZIP	RICHMOND VA	
TITLE	VS	☐ DELETE
NAME	MCCORMACK, DANIEL M	
STREET ADDRESS	901 EAST CARY STREET, #1400	
CITY-STATE-ZIP	RICHMOND VA	
TITLE	AS	☐ DELETE
NAME	TOY, CHERYLE K	
STREET ADDRESS	901 EAST CARY STREET, #1400	
CITY-STATE-ZIP	RICHMOND VA	
TITLE	T	☐ DELETE
NAME	DENDTLER, E. S	
STREET ADDRESS	8000 VILLA PK DR	
CITY-STATE-ZIP	RICHMOND VA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

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:

Stewart Dendtler (STEWART DENDTLER)

3/9/96 804-262-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)