

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

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:42

DOCUMENT # **843507** (5)

1. Corporation Name  
**OLDOVER CORPORATION**

Principal Place of Business Mailing Address  
**2508 CHAMBERLAYNE AVE.  
P.O. BOX 27211  
RICHMOND VA. 23261** **2508 CHAMBERLAYNE AVE  
RICHMOND VA 23222-4215  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/19/1979** 3a. Date of Last Report **02/18/1994**

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 27. Suite, Apt. #, etc.

22. City & State 28. City & State

23. Zip Country 29. Zip Country

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

4. FEI Number **54-0915235** 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

6. 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 607.0506, Florida Statutes.

SIGNATURE

Signature, typed (print) name of registered agent and date of signature

NOTE: Registered Agent signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition

TITLE **PD**  
NAME **ROBERTS, J.W.**  
STREET ADDRESS **3204 HAWTHORNE AVE.**  
CITY, ST, ZIP **RICHMOND VA**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY, ST, ZIP

TITLE **D**  
NAME **BURRIS, D.K.**  
STREET ADDRESS **1225 VALLEY DRIVE**  
CITY, ST, ZIP **ATTALLA AL**

2.1 TITLE **VICE PRES / DIRECTOR**  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY, ST, ZIP

TITLE **VPD**  
NAME **MARTIN, E. E.**  
STREET ADDRESS **8206 WESTMEATH LANE**  
CITY, ST, ZIP **RICHMOND VA**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY, ST, ZIP

TITLE **T**  
NAME **MILNER, R. B., JR.**  
STREET ADDRESS **10904 DOMINION FAIRWAYS LANE**  
CITY, ST, ZIP **GLEN ALLEN VA**

4.1 TITLE **SECRETARY**  Change  Addition  
4.2 NAME **JENNETT J.T. III**  
4.3 STREET ADDRESS **11700 YOUNG ATWOOD DRIVE**  
4.4 CITY, ST, ZIP **MIDLOTHING, VA.**

TITLE **VP**  
NAME **BURRIS, D. K.**  
STREET ADDRESS **1225 VALLEY DRIVE**  
CITY, ST, ZIP **ATTALLA AL**

5.1 TITLE **TREASURER**  Change  Addition  
5.2 NAME **FALETTI L.A.**  
5.3 STREET ADDRESS **19925 CITATION DRIVE**  
5.4 CITY, ST, ZIP **MIDLOTHING, VA.**

TITLE **ST**  
NAME **HENDRICKS, C. S. (ASST)**  
STREET ADDRESS **3924 DURETTE DR.**  
CITY, ST, ZIP **RICHMOND VA**

6.1 TITLE **ASST. SEC. - ASST. TREAS.**  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY, ST, 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 110.07(2)(a), 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. 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:

*C. S. Hendricks*  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

3-5-95

(SOS) 24-6761

ITEM #12 - ADDITIONAL OFFICERS

Vice President  
Scaplehorn, K. W.  
3026 Susquehanna Trail  
Ashland, VA 23005

Asst. Sec.  
Thornton, J. W.  
108 Running Cedar Lane  
Richmond, VA 23229