

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Jan 22 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **843507** (5)

1. Corporation Name
OLDOVER CORPORATION

Principal Place of Business
**2508 CHAMBERLAYNE AVE.
P.O. BOX 27211
RICHMOND VA. 23261**

Mailing Address
**2508 CHAMBERLAYNE AVE
RICHMOND VA 23222-4215
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/19/1979	3a. Date of Last Report 02/02/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 54-0915235	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> 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
		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	3204 HAWTHORNE AVE.	12 NAME	
CITY - ST - ZIP	RICHMOND VA	13 STREET ADDRESS	
TITLE	NAME	14 CITY - ST - ZIP	
STREET ADDRESS	1225 VALLEY DRIVE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP	ATTALLA AL	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS	
STREET ADDRESS	12317 PLEASANT LAKE TERR	2.4 CITY - ST - ZIP	
CITY - ST - ZIP	RICHMOND VA	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	NAME	3.2 NAME	
STREET ADDRESS	13925 CITADSON DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIDLOTHIAN VA	3.4 CITY - ST - ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	3026 SUSQUEHANNA TR	4.2 NAME	
CITY - ST - ZIP	ASHLAND VA	4.3 STREET ADDRESS	
TITLE	NAME	4.4 CITY - ST - ZIP	
STREET ADDRESS	3924 DURETTE DR.	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY - ST - ZIP	RICHMOND VA	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
STREET ADDRESS	3924 DURETTE DR.	5.4 CITY - ST - ZIP	
CITY - ST - ZIP	RICHMOND VA	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	NAME	6.2 NAME	
STREET ADDRESS	3924 DURETTE DR.	6.3 STREET ADDRESS	
CITY - ST - ZIP	RICHMOND VA	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 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: L. A. Facetti LEE A FACETTI 1/6/97 804 321 6761
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)