

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000000227

FILED  
Feb 20, 2003  
Secretary of State

**Entity Name:** OLD DOMINION TOBACCO COMPANY, INCORPORATED

**Current Principal Place of Business:**

5400 VIRGINIA BEACH BLVD  
VIRGINIA BEACH, VA 23462

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 62887  
VIRGINIA BEACH, VA 23466

**New Mailing Address:**

**FEI Number:** 54-0325210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RAY, ROBIN D  
Address: 5202 OCEAN FRONT AVE.  
City-St-Zip: VIRGINIA BEACH, VA 23451

Title: V ( ) Delete  
Name: DAVIS, JAMES L  
Address: 2408 HOOD DRIVE  
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: ST ( ) Delete  
Name: PATRICK, ALLEN W  
Address: 117 52ND STREET  
City-St-Zip: VIRGINIA BEACH, VA 23451

Title: D ( ) Delete  
Name: STILES, CATHERINE D  
Address: 10 E. ORCHARD DRIVE  
City-St-Zip: CHICKAMAUGA, GA 30707

**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:

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: ROBIN D. RAY

PD

02/20/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date