
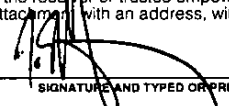


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 8:00 am
Secretary of State

03-29-2007 90025 024 ***150.00

DOCUMENT # F00000005931					
1. Entity Name FERGUSON FIRE & FABRICATION, INC.					
Principal Place of Business 18825 E. SAN JOSE AVENUE CITY OF INDUSTRY, CA 91748			Mailing Address 12500 JEFFERSON AVENUE NEWPORT NEWS, VA 23602		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 95-2912930	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KLEIN, LEO J		NAME		
STREET ADDRESS	18825 E. SAN JOSE AVENUE		STREET ADDRESS		
CITY - ST - ZIP	CITY OF INDUSTRY, CA		CITY - ST - ZIP		
TITLE	VTAS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MILLER, BRADEN L		NAME		
STREET ADDRESS	12500 JEFFERSON AVE		STREET ADDRESS		
CITY - ST - ZIP	NEWPORT NEWS, VA 23602		CITY - ST - ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	VAN DYKE, LINDA K		NAME		
STREET ADDRESS	12500 JEFFERSON AVE		STREET ADDRESS		
CITY - ST - ZIP	NEWPORT NEWS, VA		CITY - ST - ZIP		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BRAIG, ROBERT J		NAME		
STREET ADDRESS	12500 JEFFERSON AVE		STREET ADDRESS		
CITY - ST - ZIP	NEWPORT NEWS, VA		CITY - ST - ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HALL, TERRY E		NAME		
STREET ADDRESS	12500 JEFFERSON AVE		STREET ADDRESS		
CITY - ST - ZIP	NEWPORT NEWS, VA		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STEGEMAN, JOHN A		NAME		
STREET ADDRESS	12500 JEFFERSON AVE		STREET ADDRESS		
CITY - ST - ZIP	NEWPORT NEWS, VA 23602		CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Terry E. Hall, Vice President 3/26/07 757-989-2739			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			



03192007 Chg-P CR2E034 (12/06)

ATTACHMENT

Ferguson Fire & Fabrication, Inc.
Document #F00000005931

40044577

Additional Officer:

Title:	AS
Name:	Maxson, Laura L.
Street Address:	12500 Jefferson Avenue
City-St-Zip	Newport News, VA 23602