

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # F04000004728

1. Entity Name
THE J.M. FRY COMPANY



Principal Place of Business
4329 EUBANK ROAD
RICHMOND, VA 23231

Mailing Address
P.O. BOX 7719
RICHMOND, VA 23231



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-0804613
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLS, HUGH R JR
4408 WINDING RIVER DRIVE
VALRICO, FL 33594

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

0000000853439
03/26/08-80069-014 150.00

10. OFFICERS AND DIRECTORS

TITLE SD
NAME HODGES, BILLY J
STREET ADDRESS 4329 EUBANK ROAD
CITY-ST-ZIP RICHMOND, VA 23231

TITLE PD
NAME HODGES, ROBERT A
STREET ADDRESS 4329 EUBANK ROAD
CITY-ST-ZIP RICHMOND, VA 23231

TITLE TD
NAME HODGES, JAMES H
STREET ADDRESS 4329 EUBANK ROAD
CITY-ST-ZIP RICHMOND, VA 23231

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: Robert A. Hodges ROBERT A. HODGES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/08
Date

804-236-8100
Daytime Phone #