

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90274 002 ***150.00

DOCUMENT # F97000003407

1. Entity Name
CCA FINANCIAL, INC.



Principal Place of Business
8080 AMF DRIVE
RICHMOND, VA 23111

Mailing Address
P O BOX 17190
RICHMOND, VA 23226 US

94062699



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04192004

Chg-P

CR2E034 (10/03)

4. FEI Number
54-0903267

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
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

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, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME WILLIAMS, RICHARD
STREET ADDRESS 8080 AMF DRIVE
CITY-ST-ZIP MOCHANIESVILLE, VA 23111

TITLE L. CURTIS DUGGER ☐ Change ☒ Addition
NAME ASSISTANT TREASURER
STREET ADDRESS 8080 AMF DRIVE
CITY-ST-ZIP MECHANICSVILLE, VA 23111

TITLE V ☒ Delete
NAME FULLERTON, SCOTT
STREET ADDRESS 901 EAST CARY ST., STE 1500
CITY-ST-ZIP RICHMOND, VA 23219

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME RAY, PEGGY T
STREET ADDRESS 8080 AMF DR.
CITY-ST-ZIP MECHANICSVILLE, VA 23111

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE EVP ☐ Delete
NAME ALVERS, KIM
STREET ADDRESS 8080 AMF DRIVE
CITY-ST-ZIP MECHANICSVILLE, VA 23111

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME ARMSTRONG, BEVERLEY W
STREET ADDRESS 901 EST CARY ST., STE 1500
CITY-ST-ZIP RICHMOND, VA 23219

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME GOODWIN, WILLIAM H JR
STREET ADDRESS 901 E CARY ST, STE 1500
CITY-ST-ZIP RICHMOND, VA 23219

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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: *L. Curtis Dugger* L. CURTIS DUGGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/04

(204)

285-5500

Date

Daytime Phone #