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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700005401

1. Corporation Name AOA, INC.

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90021 014 ***150.00



Principal Place of Business Mailing Address				* 1001100 \$110 1011 1001 1001 1001 1001	BILL BUILL BILLI BIRLI BEEL 1781 7881		
150 W. BRAMBLETON AVE. 150 W. BRAMBLETON AVE.						<i>f</i>	
NORFOLK VA 23510 NORFOLK VA 23510			•		· · ·		
					DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed		
	•				10/13/1997		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 26					54-1843026	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Additional	
22 27					3. Collingto of Otelas Desires	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23 28					Trust Fund Contribution	Added to Fees	
Zip			Countr	У	8. This corporation owes the current year	350 = 1	
24	25	29	30		Personal Property Tax.	Yes □No	
	9. Name and Address of Curre				10. Name and Address of New Register	ed Agent	
			8	1 Name			
C.T. CORPORATION SYSTEM			8:	2 Street Ad	Idress (P.O. Box Number is Not Acceptable)	* * * * * * * * * * * * * * * * * * * *	
1200 SOUTH PINE ISLAND ROAD			"	- 0	A SECULATION OF THE PROPERTY.	and the state of the first of the first	
· PLAI	NTATION FL 33324		8:	3	17 18 3 2 2 2 2 2 2 3 2 3 3 3 3 3 3 3 3 3 3	1. 经货售银行银票	
	The state of the s		.	41 0"		Control of the country	
			84	4 City	F	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							
office or r	registered agent, or both, in the State	of Florida, Such change was a	uthorized by	y the corpora	ation's board of directors. I hereby accept the ap	pointment as registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating): DATE							
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		** *5.1	Change Addition	
NAME	BATTEN, FRANK JR	•	1.2 NAME				
STREET ADORESS	ACOUNT OR MAIN COMMAND		1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	NORFOLK VA 23510		1.4 CITY-				
TITLE	SD	☐ DELETE	2.1 TITLE	*	***************************************	☐ Change ☐ Addition	
NAME ·	RYAN, LOUIS F JR	,	2.2 NAME				
STREET ADDRESS	150 W. BRAMBLETON AVE.			ET ADDRESS		ļ	
	NORFOLK VA 23510				•		
CITY-ST-ZIP		☐ DELETE	2. 4 CITY- 3.1 TITLE	-\$1-ZIP	120 120 700	Change Addition	
TITLE	D Wynne, John		3.1 IIILE 3.2 NAME	.	•	. , .	
NAME							
STREET ADDRESS	150 W. BRAMBLETON AVE.	•	ı	ET ADDRESS		[18] [19] 经 国际 [19] [19] [19] [19] [19] [19] [19] [19]	
CITY-ST-ZIP	NORFOLK VA 23510	☐ DELETE	3.4. CITY-	ST-ZIP		☐ Change ☐ Addition	
TITLE	P PIOUADD T	□ nere≀g	4.1 TITLE	.	v Aviote v	Cloude 'str Candition	
NAME	COLE, RICHARD T		4, 2 NAME	. 1		• •	
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP	NORFOLK VA 23510		4.4 CITY-			Change Addition	
TITLE	S	☐ DELETE	5.1 TITLE	1	•	Change : Addition	
NAME	SMITH, SUSAN D		5.2 NAME	ì		•	
STREET ADDRESS	150 W. BRAMBLETON AVE.	· ·		ET ADDRESS			
CITY-ST-ZIP	NORFOLK VA 23510	·	5.4 CITY-1		· · · · · · · · · · · · · · · · · · ·		
TITLE	Į Trata ir	☐ DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME 1	RITTER, ALFRED F JR		6.2 NAME				
STREET ADDRESS	150 W. BRAMBLETON AVE.		6.3 STREE	ET ADDRESS	•		
CITY-ST-ZIP	NORFOLK VA 23510	•	6.4 CITY-1	ST-ZIP			

14. 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 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, with all other like empowered.

SIGNATURE: