

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005324

Entity Name: BASKERVILL & SON, P.C.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

101 S. 15TH STREET  
SUITE 200  
RICHMOND, VA 23219

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 400  
ATTN MARGARET HOOD  
RICHMOND, VA 232180400

## New Mailing Address:

FEI Number: 54-1258151      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR.  
STE. 4  
WESTON, FL 33331 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: VPD ( ) Delete  
Name: TYLER, BRUCE W  
Address: 101 S. 15TH STREET, SUITE 200  
City-St-Zip: RICHMOND, VA 23219

Title: SD ( ) Delete  
Name: TATE, DONALD W  
Address: 101 S. 15TH STREET, SUITE 200  
City-St-Zip: RICHMOND, VA 23219

Title: PD ( ) Delete  
Name: CLARK, ROBERT J  
Address: 101 S. 15TH STREET, SUITE 200  
City-St-Zip: RICHMOND, VA 23219

Title: C ( ) Delete  
Name: FARMER, BRENT G  
Address: 101 S. 15TH STREET, SUITE 200  
City-St-Zip: RICHMOND, VA 23219

Title: T ( ) Delete  
Name: HOOD, MARGARET D  
Address: 101 S. 15TH STREET, SUITE 200  
City-St-Zip: RICHMOND, VA 23219

Title: VPD ( ) Delete  
Name: LINDSEY, MARK S  
Address: 101 S 15TH ST SUITE 200  
City-St-Zip: RICHMOND, VA 23219

## 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:

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 exemption stated 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 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: MARGARET D. HOOD

TREA

03/24/2009

Electronic Signature of Signing Officer or Director

Date