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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11556

(8)

THE MARTIN AGENCY, INC.

Principal Place of Business Mailing Address

500 NORTH ALLEN AVENUE RICHMOND VA 23220

500 NORTH ALLEN AVENUE BICHMOND VA 23220-2904

FILED May 07 1997 8:00am Secretary of State



KICHWOND Y	A 2322U	HICHMOND VA 23220-2904			1		
					3. Date Incorporated or Qualified 09/24/1986	3a. Date of 05/14/	•
	lace of Business Shockoe Plaza	2a. Mailing Address One Shockoe P	1020		4. FEI Number		Applied For
Suite, Apt.		20	1020		54-0789050		Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7 -	.75 Additional ee Required
City & State 23 Richmond, VA		City & State 28 Richmond, VA		Election Campaign Financing Trust Fund Contribution			
Zip 24 23219	Country	29 23219-4132 30	Country USA		8. This corporation has liability for in Florida Statutes		
	9. Name and Address of Currer	-0	-1T		10. Name and Address of New Reg		
TH	E PRENTICE HALL CORPORATION	DN SYSTEM, INC.	81	Name	-		
	OI HAYES ST.	,	82	Stroot Add	dress (P.O. Box Number is Not Acceptable	la\	
	E. 105		02	Sileet Add	iless (F.O. Box Number is Not Acceptable	ie)	
TA	LLAHASSEE FL 32301		83				
	v ^o		84	City		FL 85	Zip Code
11. Pursuant office or r agent. I a SIGNATURE	, and the second second				poration submits this statement for the pation's board of directors. I hereby accep		ging its registered ent as registered
12.	Signature, typed or printed name of registered age OFFICERS AN		egistered Apo	ent signature requi	ired when reinstating)	DATE COO AND DIDE	0700011140
TITLE	CEOD	DELETE	1.1 1111.8		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	
NAME	ADAMS, JOHN B., JR.		1.2 NAME				lange [] Moonion
STREET ADDRESS	500 NORTH ALLEN AVENUE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	RICHMOND VA		1.4 CITY - S	i			
TITLE	Vδ	☐ DETEIE	2.1 TITLE			☐ CI	nange
NAME	FERRAN, RENE J.		2.2 NAME				
STREET ADDRESS	500 NORTH ALLEN AVENUE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	RICHMOND VA 23220		2. 4 CITY-	51 - 71P			
TITLE NAME	VSD	☐ DELETE	3.1 TITLE			LJ C	nange 🔲 Addition
STREET ADDRESS	MCKEE, PAUL V. 500 NORTH ALLEN AVENUE		3.2 NAME	Lookena			
CITY-ST-ZIP	RICHMOND VA 23220		3.3 STREET 3.4. CHY-5				
TITLE	CD	DELETE	4.1 TITLE	51 - 21F	······	C	nange Addition
NAME	JACOBS, HARRY M., JR.		4. 2 NAME			L., V.	La year
STREET ADDRESS	500 NORTH ALLEN AVENUE		4.3 STREET	ADDRESS			
CITY-ST-ZIP	RICHMOND VA		4.4 CITY - S	T - 71P			
TITLE	PD	DELETE	5.1 TITLE			☐ Cr	nange Addition
NAME	HUGHES, JAMES R.		5.2 NAME				
STREET ADDRESS	500 NORTH ALLEN AVENUE		5.3 STREET	ADDRESS			
CITY-ST-ZIP	RICHMOND VA	Tourse	5.4 CITY-S	T - ZIP		——————————————————————————————————————	
TITLE	VT WEATHERIV THOMAS A	☐ DELETE	6.1 TITLE			☐ Cf	nange [] Addition
NAME OYDEET ADDOCOC	WEATHERLY, THOMAS A.		6.2 NAME				
STREET ADDRESS	500 NORTH ALLEN AVENUE		6.3 STREET	1			
CITY-ST-ZIP	RICHMOND VA 23220		64 CHY-S	T-ZIP			

14. I do 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 Book 13 if changed, or on an attacpment with an address.

CHATHER THERE OF WINDS HITCHILL A. West and Waster 804 698-8145