

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

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P33089 (4)
1. Corporation Name
THE E.B. MALONE CORPORATION

Principal Place of Business Mailing Address
MAIN STREET MAIN STREET
BASSETT VA 24055 BASSETT VA 24055

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/11/1991	
4. FEI Number 59-1024510	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

9. Name and Address of Current Registered Agent

LANDAU, CHARLES H. PHILIP E. BOOKER
309 S. ACUFF ROAD
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 in both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *Philip E. Booker* Philip E. Booker V-P & G-M 2/11/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT & C.O.O. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SILMAN, R.H.	1.2 NAME	ROBERT H. SILMAN, JR.
STREET ADDRESS	COUNTRY CLUB DR	1.3 STREET ADDRESS	310 PLANTATION ROAD
CITY-ST-ZIP	BASSETT VA	1.4 CITY-ST-ZIP	MARTINSVILLE, VA 24055
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	CHAIRMAN & C.E.O. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUNSUCKER, G.A.	2.2 NAME	PAUL FULTON
STREET ADDRESS	1006 PLANTATION RD	2.3 STREET ADDRESS	1093 E KENT ROAD
CITY-ST-ZIP	MARTINSVILLE VA	2.4 CITY-ST-ZIP	WINSTON-SALEM, NC 27104
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOOKER, P.E.	3.2 NAME	
STREET ADDRESS	1320 STONEWALL JACKSON TR	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARTINSVILLE VA	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, PETER W DR	4.2 NAME	
STREET ADDRESS	4803 SULGRAVE ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	RICHMOND VA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	ASSISTANT SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	RON F. CLARK
STREET ADDRESS		5.3 STREET ADDRESS	66 SHUFF RIDGE LANE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	WOOLWINE, VA 24185
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	000002438550
STREET ADDRESS		6.3 STREET ADDRESS	-02/24/98--01008--023
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

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.

CR2E034 (10/97)