

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Merham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **855377** (8)

1. Corporation Name
FERGUSON ENTERPRISES, INC.



Principal Place of Business: **618 BLAND BLVD PO BOX 2778 NEWPORT NEWS VA 23602**
Mailing Address: **618 BLAND BLVD PO BOX 2778 NEWPORT NEWS VA 23602**

2. Principal Place of Business: 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address: 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

3. Date Incorporated or Qualified: **01/31/1983**
3a. Date of Last Report: **02/01/1995**
4. FEI Number: **54-1211771** Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324**
10. Name and Address of New Registered Agent: 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0402 and 607.1504, 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 agent. I am familiar with and accept the obligations of Section 607.0504, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
CD DIBBEN, DAVID A 407 WALSING DR RICHMOND VA	<input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD BANKS, CHARLES A WHITEHALL FARM ZANONI VA 23191	<input type="checkbox"/> DELETE	2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD THOMAS, JAMES B., JR. 905 RIVER RD NEWPORT NEWS VA 23601	<input type="checkbox"/> DELETE	3. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D SCHELL, GEORGE R. 4517 BOB JONES DR VIRGINIA BEACH VA 23456	<input type="checkbox"/> DELETE	4. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S HALL, TERRY E 109 PORT COVE YORKTOWN VA 23693	<input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VT MITCHELL, STEWART P. 4 LITTLE BLUFF RD NEWPORT NEWS VA 23606	<input type="checkbox"/> DELETE	6. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		7. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		8. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		10. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		11. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		12. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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. I am an officer or director of the corporation or the officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 or Book 14 of changes, or on a similar document with an address.

SIGNATURE: *Stewart P. Mitchell* 2/21/96 804-874-7795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Stewart P. Mitchell

CR2E034 (12/95)