

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005931

FILED
Apr 27, 2010
Secretary of State

Entity Name: FERGUSON FIRE & FABRICATION, INC.

Current Principal Place of Business:

18825 E. SAN JOSE AVENUE
CITY OF INDUSTRY, CA 91748

New Principal Place of Business:

Current Mailing Address:

12500 JEFFERSON AVENUE
NEWPORT NEWS, VA 23602

New Mailing Address:

FEI Number: 95-2912930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: P
Name: KLEIN, LEO J
Address: 18825 E. SAN JOSE AVENUE
City-St-Zip: CITY OF INDUSTRY, CA

Title: SVPT
Name: KELTNER, DAVID L
Address: 12500 JEFFERSON AVE
City-St-Zip: NEWPORT NEWS, VA 23602

Title: S
Name: MAXSON, LAURA L
Address: 12500 JEFFERSON AVE
City-St-Zip: NEWPORT NEWS, VA

Title: CD
Name: BRAIG, ROBERT J
Address: 12500 JEFFERSON AVE
City-St-Zip: NEWPORT NEWS, VA

Title: VPAS
Name: HALL, TERRY E
Address: 12500 JEFFERSON AVE
City-St-Zip: NEWPORT NEWS, VA

Title: D
Name: MURPHY, KEVIN M
Address: 12500 JEFFERSON AVE
City-St-Zip: NEWPORT NEWS, VA 23602

I hereby 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 all other like empowered.

SIGNATURE: LAURA L. MAXSON

SEC

04/27/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date