


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90102 049 ***150.00

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1. Entity Name
BASKERVILL & SON, P.C.



Principal Place of Business
**101 S. 15TH STREET
 SUITE 200
 RICHMOND, VA 23219**

Mailing Address
**PO BOX 400
 ATTN MARGARET HOOD
 RICHMOND, VA 23218-0400**

40091004



2. Principal Place of Business - No P.O. Box #
 3. Mailing Address

Suite, Apt. #, etc.
 Suite, Apt. #, etc.

03282007 Chg-P CR2E034 (12/06)

City & State
 City & State

4. FEI Number
54-1258151

Applied For
 Not Applicable

Zip
 Country
 Zip
 Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
 2731 EXECUTIVE PARK DR.
 STE. 4
 WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / DIR TYLER, BRUCE W 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC / DIR TATE, DONALD W 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES / DIR CLARK, ROBERT J 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C FARMER, BRENT G 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOOD, MARGARET D 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCCUMBER, IRWIN H 101 S. 15TH STREET, SUITE 200 RICHMOND, VA 23219	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / DIR Mark S. Lindsey 101 S. 15th St Suite 200 RICHMOND VA 23219	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELVP / DIR Mark A. Larson 101 S 15th STREET SUITE 200 RICHMOND, VA 23219	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / DIR MICHAEL G WASH 101 S 15th STREET SUITE 200 RICHMOND VA 23219	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / DIR CAROLE A. ROSS 101 S. 15th STREET SUITE 200 RICHMOND VA 23219	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret D Hood Date: 3-28-07 Daytime Phone #: 804 343 1070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR