2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 08:00 AM
Secretary of State

DOCUMENT # F01000002468

1. Entity Name
S. B. BALLARD CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
2828 SHIPPS CORNER RD VIRGINIA BEACH, VA 23453	2828 SHIPPS CORNER RD VIRGINIA BEACH, VA 23453

DO NOT WRITE IN THIS SPACE

03032006 No Chg-P CR2E034 (11/05)

4. FEI Number
54-1624392

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	BALLARD, STEPHEN B
STREET ADDRESS	1612 ARNOLD CIRCLE
CITY-ST-ZIP	VIRGINIA BEACH, VA
TITLE	V
NAME	HEADRICK, DANNY L
STREET ADDRESS	1580 LEVEL LOOP
CITY-ST-ZIP	VIRGINIA BEACH, VA
TITLE	S
NAME	HUDSON, DEBORAH J
STREET ADDRESS	522 MARSH DUCK WAY
CITY-ST-ZIP	VIRGINIA BEACH, VA
TITLE	VPCE
NAME	PAYNE, MARK
STREET ADDRESS	820 PLYMOUTH LANE
CITY-ST-ZIP	VIRGINIA BEACH, VA 23451
TITLE	VPFE
NAME	BARRETT, WAYNE
STREET ADDRESS	8538 OLD OCEAN VIEW RD
CITY-ST-ZIP	NORFOLK, VA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UI0000046203U
03/20/06-80019-012 150.00

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03/21/06-80019-012 150.00

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: Deborah J. Hudson 3/3/06 757-440-5555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #