

Scurlock Nancy M
 Form 3/A
 March 17, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person * ^ ESTATE OF SCURLOCK ARCH C & SCURLOCK NANCY M EXECUTIRX (Last) (First) (Middle) 10575 NW SKYLINE BLVD (Street) PORTLAND, ^ OR ^ 97231-2616 (City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement (Month/Day/Year) 12/12/2003</p>	<p>3. Issuer Name and Ticker or Trading Symbol HALIFAX CORP [HX]</p>	<p>4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ___ Director ___X___ 10% Owner ___ Officer ___ Other (give title below) (specify below)</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year) 12/15/2003</p> <p>6. Individual or Joint/Group Filing(Check Applicable Line) ___ Form filed by One Reporting Person _X_ Form filed by More than One Reporting Person</p>
--	---	---	--	---

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, Par Value \$ 0.24	785,922 ⁽¹⁾	D ⁽²⁾	^

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	------------------------------------	---------------------------------	--

Edgar Filing: Scurlock Nancy M - Form 3/A

Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)
------------------	-----------------	-------	----------------------------	---------------------	---

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ESTATE OF SCURLOCK ARCH C & SCURLOCK NANCY M EXECUTIRX 10575 NW SKYLINE BLVD PORTLAND, OR 97231-2616		X		
Scurlock Nancy M 10575 NW SKYLINE BLVD PORTLAND, OR 97231-2616		X		

Signatures

/s/ Nancy M. Scurlock, Individually and as Executrix of the Estate of Arch C. Scurlock

03/17/2005

__Signature of Reporting Person

Date

Nancy M. Scurlock

03/17/2005

__Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The 2003 Form 3 inadvertently failed to account for 1,500 additional shares of Common Stock, Par Value \$0.24 ("Common Stock"), beneficially owned by the Estate of Arch C. Scurlock (the "Estate"). The 785,922 shares set forth herein includes such 1,500 shares of Common Stock.
- (2) The 2003 Form 3 incorrectly stated that the Estate's ownership form was indirect instead of direct. The 785,922 shares set forth herein are owned directly by the Estate and indirectly by Nancy M. Scurlock, Executrix of the Estate.

^

Remarks:

The Form 3 filed with the Securities and Exchange Commission on December 15, 2003 (the "2003

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.