

1.) CORPORATION NAME:

**TRENIS, INCORPORATED**

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM E RUSSELL SR  
9343 ELK RUN RD  
CATLETT, VA**

SCC ID NO: **00767509**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAUQUIER COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3390 CATLETT RD  
PO BOX 78

CITY/ST/ZIP: CATLETT, VA 20119

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	WILLIAM E. RUSSELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9343 ELK RUN RD		
CITY/ST/ZIP/CO:	CATLETT, VA 20119		

NAME:	THOMAS S TRENIS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8613 TWIN FALLS ROAD		
CITY/ST/ZIP/CO:	COPPER HILL, VA 24079		

NAME:	THOMAS H. SAMUEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2413 CARRIAGE FORD RD		
CITY/ST/ZIP/CO:	CATLETT, VA 20119		

NAME:	NEVA S TRENIS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1607 SUNKEN ROAD		
CITY/ST/ZIP/CO:	FREDERICKSBURG, VA 22401		

NAME:	CATHY ALLIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3606 WEST CHESTER COURT		
CITY/ST/ZIP/CO:	MIDDLETOWN, MD 21769		

NAME:	JULIE AMSLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9252 ELK RUN RD		
CITY/ST/ZIP/CO:	CATLETT, VA 20119		

NAME:	MARY ALYCE JOHNSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1114 GROVELAND DRIVE		
CITY/ST/ZIP/CO:	FOREST, VA 24551		

NAME:	ANN RIDENOUR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	285 BREEDEN MT. RD		
CITY/ST/ZIP/CO:	ELKTON, VA 22827		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ WILLIAM E. RUSSELL	WILLIAM E. RUSSELL, PRESIDENT	11/29/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.