

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215543852				
1.) CORPORATION NAME: WOLFTRAP NURSERY, INC.		DUE DATE: 9/30/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: WILLIAM F CUPP 9439 LEESBURG PIKE VIENNA, VA		SCC ID NO: 01619105				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>15,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	15,000
CLASS	AUTHORIZED					
COMMON	15,000					
4.) STATE OR COUNTRY OF INCORPORATION: VA						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 9439 LEESBURG PIKE CITY/ST/ZIP: VIENNA, VA 22182						
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 F CUPP TITLE: PRESIDENT ADDRESS: 9439 LEESBURG PIKE CITY/ST/ZIP/CO: VIENNA, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: MARGARET A MCGUIRE TITLE: SECRETARY ADDRESS: 448 W. SURF STREET CITY/ST/ZIP/CO: CHICAGO, IL 60657	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
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 F CUPP	WILLIAM F CUPP, PRESIDENT	12/6/2015				
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.						