

1.) CORPORATION NAME:

**SECKMAN PRINTING, INC.**

DUE DATE: **6/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CLINT P SECKMAN  
305 ENTERPRISE DRIVE  
FOREST, VA**

SCC ID NO: **02433399**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**BEDFORD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 305 ENTERPRISE DRIVE

CITY/ST/ZIP: FOREST, VA 24551

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL T SECKMAN		
TITLE: PRESIDENT		
ADDRESS: 305 ENTERPRISE DRIVE		
CITY/ST/ZIP/CO: FOREST, VA 24551		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: VICKI Y SECKMAN		
TITLE: VP/SEC/TREA		
ADDRESS: 305 ENTERPRISE DRIVE		
CITY/ST/ZIP/CO: FOREST, VA 24551		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MICHAEL LELEAND SECKMAN		
TITLE: VICE PRESIDENT		
ADDRESS: 305 ENTERPRISE DRIVE		
CITY/ST/ZIP/CO: FOREST, VA 24551		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CLINT P SECKMAN		
TITLE: VICE PRESIDENT		
ADDRESS: 305 ENTERPRISE DRIVE		
CITY/ST/ZIP/CO: FOREST, VA 24551		

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/ MICHAEL T SECKMAN	MICHAEL T SECKMAN,	7/21/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.