

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213533172
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1.) CORPORATION NAME: MEDCORP., INC.	DUE DATE: 7/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JOHN V ROBINSON 7102 THREE CHOPT RD RICHMOND, VA	SCC ID NO: 03071305				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1371 CALCUTTA DRIVE CITY/ST/ZIP: GULF BREEZE, FL 32563	
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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: HOWARD E ANDERSON II TITLE: PRESIDENT ADDRESS: 1371 CALCUTTA DRIVE CITY/ST/ZIP/CO: GULF BREEZE, FL 32563	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: CINDY W ANDERSON TITLE: TREASURER ADDRESS: 1371 CALCUTTA DRIVE CITY/ST/ZIP/CO: GULF BREEZE, FL 32563	<input checked="" type="checkbox"/>	OFFICER	<input 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/ CINDY W ANDERSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CINDY W ANDERSON, TREASURER PRINTED NAME AND CORPORATE TITLE	7/17/2013 DATE
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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.