

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215503518
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1.) CORPORATION NAME: <b>AUGUST WALLMEYER COMMUNICATIONS, LTD.</b>	DUE DATE: <b>3/31/2015</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>AUGUST WALLMEYER          804 DOVER BLUFF PLACE          MANAKIN SABOT, VA</b>	SCC ID NO: <b>03359544</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>GOOCHLAND COUNTY</b>	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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 804 DOVER BLUFF PL.

CITY/ST/ZIP: MANAKIN-SABOT, VA 23103

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: AUGUST WALLMEYER TITLE: P/T ADDRESS: 804 DOVER BLUFF PLACE CITY/ST/ZIP/CO: MANAKIN-SABOT, VA 23103		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KATHERINE S WALLMEYER TITLE: VP/S ADDRESS: 804 DOVER BLUFF PL. CITY/ST/ZIP/CO: MANAKIN-SABOT, VA 23103		

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/ AUGUST WALLMEYER	AUGUST WALLMEYER, P/T	1/24/2015
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.