

1.) CORPORATION NAME:

**SENTRY EQUIPMENT ERECTORS, INC.**

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BARBARA F HOLCOMB  
13150 E LYNCHBURG SALEM TPKE  
FOREST, VA**

SCC ID NO: **03622818**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	150,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**BEDFORD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 13150 E LYNCHBURG SALEM TNPK

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 type="checkbox"/> DIRECTOR
NAME:	TIMOTHY A WOODSON	
TITLE:	PRESIDENT	
ADDRESS:	104 QUEENS COURT	
CITY/ST/ZIP/CO:	GOODE, VA 24556	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BARBARA F HOLCOMB	
TITLE:	TREASURER/SEC	
ADDRESS:	3195 SONTAG ROAD	
CITY/ST/ZIP/CO:	ROCKY MOUNT, VA 24151	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ADAM V VINOSKEY	
TITLE:	CHAIRMAN	
ADDRESS:	1413 SHASTA LN	
CITY/ST/ZIP/CO:	FOREST, VA 24551	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GARY D HUNT	
TITLE:	DIRECTOR	
ADDRESS:	3055 TECH PARK WAY	
CITY/ST/ZIP/CO:	DELAND, FL 32724	

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/ BARBARA F HOLCOMB	BARBARA F HOLCOMB,	11/11/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER/SEC 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.