

1.) CORPORATION NAME:

**Strongwell Corporation**

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NICOLE F INGLE  
WOODS ROGERS PLC  
10 S JEFFERSON ST STE 1400**

SCC ID NO: **04114906**

**ROANOKE, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	1,200
COMNV	118,800

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ROANOKE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 COMMONWEALTH AVENUE

CITY/ST/ZIP: BRISTOL, VA 24201

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:	G DAVID OAKLEY JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME:	GLENN P BAREFOOT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME:	DAVID E GIBBS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME:	JOHN E. DELANEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY/TREAS		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME:	JOHN D. TICKLE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME:	JEFFREY E TICKLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	400 COMMONWEALTH AVENUE		
CITY/ST/ZIP/CO:	BRISTOL, VA 24201		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN D TICKLE II DIRECTOR 400 COMMONWEALTH AVE BRISTOL, VA 24201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL J JASZEWSKI VICE PRESIDENT 400 COMMONWEALTH AVENUE BRISTOL, VA 24201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICHOLAS C CONTE ASST SECRETARY 400 COMMONWEALTH AVENUE BRISTOL, VA 24201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANN M TICKLE DIRECTOR 400 COMMONWEALTH AVENUE BRISTOL, VA 24201	<input 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/ G DAVID OAKLEY JR	G DAVID OAKLEY JR, P/CEO	6/26/2014	
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.			