

1.) CORPORATION NAME:

CAMG-C, Incorporated

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**VINCENT S GALLO
863 GLENROCK RD STE 200
NORFOLK, VA**

SCC ID NO: **04596235**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

NORFOLK CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 863 GLENROCK ROAD

CITY/ST/ZIP: NORFOLK, VA 23502

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:	WILL DEWES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	863 GLENROCK ROAD		
CITY/ST/ZIP/CO:	STE 200 NORFOLK, VA 23502		
NAME:	GORDON SAFFOLD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	863 GLENROCK ROAD		
CITY/ST/ZIP/CO:	STE 200 NORFOLK, VA 23502		
NAME:	SUSAN D HENSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	863 GLENROCK RD		
CITY/ST/ZIP/CO:	STE 200 NORFOLK, VA 23502		
NAME:	VINCENT S GALLO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC DIR/CEO		
ADDRESS:	863 GLENROCK RD		
CITY/ST/ZIP/CO:	STE 200 NORFOLK, VA 23502		
NAME:	REGINA ARTZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	863 GLENROCK ROAD		
CITY/ST/ZIP/CO:	STE 200 NORFOLK, VA 23502		

NAME: ROBIN ESTES TITLE: DIRECTOR ADDRESS: 863 GLEN ROCK ROAD STE 200 CITY/ST/ZIP/CO: NORFOLK, VA 23502	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JC KREIDEL TITLE: DIRECTOR ADDRESS: 863 GLENROCK ROAD STE 200 CITY/ST/ZIP/CO: NORFOLK, VA 23502	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: EDWARD MILLER TITLE: DIRECTOR ADDRESS: 863 GLENROCK ROAD SUITE 200 CITY/ST/ZIP/CO: NORFOLK, VA 23502	<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/ VINCENT S GALLO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VINCENT S GALLO, EXEC DIR/CEO PRINTED NAME AND CORPORATE TITLE	4/22/2014 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.		