

1.) CORPORATION NAME:

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

CAMG-D, Incorporated

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **04596243**

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

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 RD STE 200

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

NAME:	JC KREIDEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	863 GLENROCK ROAD		
CITY/ST/ZIP/CO:	SUITE 200 NORFOLK, VA 23502		

NAME:	EDWARD MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	863 GLENROCK ROAD		
CITY/ST/ZIP/CO:	SUITE 200 NORFOLK, VA 23502		

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	VINCENT S GALLO, CEO	4/22/2014
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.