

1.) CORPORATION NAME: CONSOLIDATED REPAIR SERVICES, INC.	DUE DATE: 12/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GARY B PATTERSON SAUNDERS CARY & PATTERSON 9100 ARBORETUM PKWY STE 300 RICHMOND, VA	SCC ID NO: 05310842				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD COUNTY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </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: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 18444 BEAZLEY LANE

CITY/ST/ZIP: MILFORD, VA 22514

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: RUSSELL C EDGERTON TITLE: PRESIDENT ADDRESS: 1844 BEAZLEY LANE CITY/ST/ZIP/CO: MILFORD, VA 22514	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: DEBORAH L EDGERTON TITLE: VP/S/T ADDRESS: 18444 BEAZLEY LANE CITY/ST/ZIP/CO: MILFORD, VA 22514	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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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/ DEBORAH L EDGERTON	DEBORAH L EDGERTON, VP/S/T	1/18/2016
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.