

1.) CORPORATION NAME: WILTON CAPITAL MANAGEMENT SERVICES, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GEORGE R HINNANT 2520-A GASKINS ROAD HENRICO, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 2/28/2013 SCC ID NO: 06122162 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	500
CLASS	AUTHORIZED				
COMMON	500				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 2520-A Gaskins Road CITY/ST/ZIP: Henrico, VA 23238

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: E CARLTON WILTON, JR TITLE: PRESIDENT ADDRESS: 2520-A Gaskins Road CITY/ST/ZIP/CO: Henrico, VA 23238	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: JOANNE D MONDAY TITLE: VP/S ADDRESS: 2520-A Gaskins Road CITY/ST/ZIP/CO: Henrico, VA 23238	<input checked="" type="checkbox"/>	OFFICER	<input 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/ JOANNE D MONDAY	JOANNE D MONDAY, VP/S	9/3/2013
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.