

1.) CORPORATION NAME: <b>Wilshire, Inc.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>C. TUCKER WALDRUFF          103 THIRD ST SE          P.O. BOX 223           CHARLOTTESVILLE, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>CHARLOTTESVILLE CITY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	DUE DATE: <b>5/31/2014</b>  SCC ID NO: <b>06591267</b>  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: 1534 MOORELAND BLVD.  CITY/ST/ZIP: BRENTWOOD, TN 37027
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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: MICAH WILSHIRE TITLE: P/S ADDRESS: 1534 MOORELAND BLVD. CITY/ST/ZIP/CO: BRENTWOOD, TN 37027	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: LORI WILSHIRE TITLE: TREASURER ADDRESS: 1534 MOORELAND BLVD. CITY/ST/ZIP/CO: BRENTWOOD, VA 37027	<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/ MICAH WILSHIRE	MICAH WILSHIRE, P/S	5/14/2014
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.