

1.) CORPORATION NAME:

**American Wood Council**

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **07245046**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**GLEN ALLEN, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 222 Catoclin Circle SE  
STE 201

CITY/ST/ZIP: LEESBURG, VA 20175

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: ROBERT GLOWINSKI TITLE: PRESIDENT ADDRESS: 222 Catoclin Circle SE #201 CITY/ST/ZIP/CO: LEESBURG, VA 20175	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DIANA BLENKHORN TITLE: DIRECTOR ADDRESS: BOX 459 AMHERST NS,CANADA , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARC BRINKMEYER TITLE: DIRECTOR ADDRESS: 4447 EAST CHILCO ROAD CITY/ST/ZIP/CO: ATHOL, ID 83801	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TOM CORRICK TITLE: DIRECTOR ADDRESS: 1111 W JEFFERSON ST CITY/ST/ZIP/CO: BOISE, ID 83728	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BRIAN LUOMA TITLE: DIRECTOR ADDRESS: 414 UNION STREET #2000 CITY/ST/ZIP/CO: NASHVILLE, TN 37219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	FRITZ R MASON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	133 PEACHTREE ST NE		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-1808		
NAME:	ANDREW MILLER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	520 SW YAMHILL STREET #700		
CITY/ST/ZIP/CO:	PORTLAND, OR 97204		
NAME:	PATRICK PATRANELLA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	DRAWER N		
CITY/ST/ZIP/CO:	DIBOLL, TX 75941		
NAME:	JOE PATTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	BOX 48999		
CITY/ST/ZIP/CO:	TUSCALOOSA, AL 35404		
NAME:	JAMES RABE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1955 POWISS RD		
CITY/ST/ZIP/CO:	WEST CHICAGO, IL 60185		
NAME:	ROBERT TAYLOR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	BOX 9777		
CITY/ST/ZIP/CO:	FEDERAL WAY, WA 98063		
NAME:	Ray Dillon	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Box 7200		
CITY/ST/ZIP/CO:	El Dorado, AZ 71731		
NAME:	George Emmerson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Box 496028		
CITY/ST/ZIP/CO:	Redding, CA 96049		
NAME:	Danny White	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Box 708		
CITY/ST/ZIP/CO:	Brewton, AL 36427		

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/ ROBERT GLOWINSKI	ROBERT GLOWINSKI, PRESIDENT	5/23/2013
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.