

1.) CORPORATION NAME: Health Risk Screening, Inc.	DUE DATE: 12/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VONDA W CHAPPELL KAUFMAN & CANOLES, P.C. 501 INDEPENENCE PKWY., STE 100 CHESAPEAKE, VA	SCC ID NO: 07309651				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESAPEAKE CITY	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: 6437 AZALEA GARDEN ROAD

CITY/ST/ZIP: NORFOLK, VA 23518

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: ERIC R GREEN TITLE: PRES/TREAS ADDRESS: 508 GLENLEAF DRIVE CITY/ST/ZIP/CO: NORCROSS, GA 30092	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: ERIN R MATHEWS TITLE: VP/SEC ADDRESS: 136 CHERRY STREET CITY/ST/ZIP/CO: NORFOLK, VA 23503	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: ROBERT J REFO TITLE: CHAIRMAN ADDRESS: 1594 ROXBURG LANE CITY/ST/ZIP/CO: DUNEDIN, FL 34698	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: KAREN GREEN MCGOWAN TITLE: DIRECTOR ADDRESS: 6437 AZALEA GARDEN ROAD CITY/ST/ZIP/CO: NORFOLK, VA 23518	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: LARRY POLNICKY TITLE: DIRECTOR ADDRESS: 14429 MIRABELLE VISTA CIRCLE CITY/ST/ZIP/CO: TAMPA, FL 33626	<input 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/		1/20/2015
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.