

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215532139

1.) CORPORATION NAME:

Museum Resources Construction and Millwork Inc.

DUE DATE: **8/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CHRISTOPHER K PEACE
8101 VANGUARD DR STE 150
PO BOX 819**

SCC ID NO: **07407224**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

MECHANICSVILLE, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4101 SOUTH MOUNTCASTLE ROAD

CITY/ST/ZIP: PROVIDENCE FORGE, VA 23140

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.

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KERRY LYNN SHACKELFORD		
TITLE:	PRESIDENT		
ADDRESS:	5005 WILDLIFE RIDGE TRAIL		
CITY/ST/ZIP/CO:	QUINTON, VA 23141		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KERRY LYNN SHACKELFORD		
TITLE:	DIRECTOR		
ADDRESS:	5005 WILDLIFE RIDGE TRAIL		
CITY/ST/ZIP/CO:	QUINTON, VA 23141		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KAREN KENT SHACKELFORD		
TITLE:	DIRECTOR		
ADDRESS:	5005 WILDLIFE RIDGE TRAIL		
CITY/ST/ZIP/CO:	QUINTON, VA 23141		

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.

<u>/s/ KERRY LYNN SHACKELFORD</u>	<u>KERRY LYNN SHACKELFORD,</u>	<u>8/31/2015</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.