

1.) CORPORATION NAME: LWA, Inc.	DUE DATE: 11/30/2014
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JOHN B VINSON 16405 COPPERTREE DR MONTPELIER, VA	SCC ID NO: 07440480
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12718 GREENWOOD ROAD

CITY/ST/ZIP: GLEN ALLEN, VA 23059

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: P MICHAEL GUTHRIE TITLE: PRESIDENT ADDRESS: 15003 KINGS GRANT LN CITY/ST/ZIP/CO: DOSWELL, VA 23047	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: STEPHEN G CONDREY TITLE: VP/DIRECTOR ADDRESS: 15181 WHISPERING SPRINGS PL CITY/ST/ZIP/CO: MONTPELIER, VA 23192	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOHN B VINSON TITLE: DIRECTOR/SEC ADDRESS: 16405 COPPERTREE DR CITY/ST/ZIP/CO: MONTPELIER, VA 23192	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: PATRICK W MOORE TITLE: DIRECTOR/TREA ADDRESS: 15127 QUAKER CHURCH RD CITY/ST/ZIP/CO: MONTPELIER, VA 23192	<input checked="" type="checkbox"/>	OFFICER	<input checked="" 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/ JOHN B VINSON	JOHN B VINSON, DIRECTOR/SEC	12/21/2014
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.