

1.) CORPORATION NAME: <b>Vermeer Mid Atlantic, Inc.-MD (USED IN VA BY:Vermeer Mid Atlantic, Inc.)</b>	DUE DATE: <b>10/31/2013</b>  SCC ID NO: <b>F0341174</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>RUSSELL MARSHALL 177 KELLEY LN KING WILLIAM, VA</b>	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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>KING WILLIAM COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>MD</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 10501 VERMEER PLACE  CITY/ST/ZIP: ASHLAND, VA 23005	
---	--

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: JOHN L VOS TITLE: VICE PRESIDENT ADDRESS: P.O. BOX 1447 CITY/ST/ZIP/CO: ANNAPOLIS, MD 21404	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
--	---	--	--

NAME: CHRISTINE A VOS TITLE: SEC/TREAS ADDRESS: 1710 SEVERN FOREST DR CITY/ST/ZIP/CO: ANNAPOLIS, MD 21401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

NAME: TRICIA J VOS TITLE: DIRECTOR ADDRESS: 201 LIGHTHOUSE VIEW DR CITY/ST/ZIP/CO: STEVENSVILLE, MD 21666	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
--	----------------------------------	--	--

NAME: ROBIN M VOS TITLE: DIRECTOR ADDRESS: 201 LIGHTHOUSE VIEW DR CITY/ST/ZIP/CO: STEVENSVILLE, MD 21666	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
---	----------------------------------	--	--

NAME: Mark Boyle TITLE: PRESIDENT ADDRESS: 503 Popular School Road CITY/ST/ZIP/CO: Centreville, MD 21617	<input checked="" type="checkbox"/> OFFICER	<input 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/ Mark Boyle	Mark Boyle, PRESIDENT	10/7/2013
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.