

1.) CORPORATION NAME:

DUE DATE: **4/30/2014**

**Groendyke Transport Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F0453615**

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**OK**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2510 ROCK ISLAND BLVD

CITY/ST/ZIP: ENID, OK 73702

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.

<p>NAME: GREG HODGEN TITLE: PRESIDENT ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MIKE BARNTHOUSE TITLE: CFO / VP ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ROB FRIES TITLE: VICE PRESIDENT ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: BERNARD HIGGINS TITLE: VICE PRESIDENT ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: STEVE NISWANDER TITLE: VICE PRESIDENT ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DON QUERCIAGROSSA TITLE: VICE PRESIDENT ADDRESS: 2510 ROCK ISLAND BLVD CITY/ST/ZIP/CO: ENID, OK 73701</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	DAVID SNAPP	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	BARRY S MCDANIEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	S/T		
ADDRESS:	1718 DENIM LN		
CITY/ST/ZIP/CO:	ENID, OK 73703		
NAME:	JOHN D. GROENDYKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COB		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	DAVID JAMES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	2510 ROCK ISLAND BVLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	MATTHEW MUELLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	DAVID H SCHAUB	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Gen Counsel		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	VIRGINIA GROENDYKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	JOHN HAYDEN GROENDYKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	HAROLD B GROENDYKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	BEVERLY SHAWN GROENDYKE-HODGEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		
NAME:	MELANIE VAL GROENDYKE-MASON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2510 ROCK ISLAND BLVD		
CITY/ST/ZIP/CO:	ENID, OK 73701		

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/ MATTHEW MUELLER</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>MATTHEW MUELLER, CONTROLLER</u> PRINTED NAME AND CORPORATE TITLE	<u>6/18/2014</u> DATE
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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.