

1.) CORPORATION NAME: K. Neal International Trucks, Inc.	DUE DATE: 12/31/2012								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802	SCC ID NO: F0527897								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td style="text-align: center;">45,000</td> </tr> <tr> <td>COMB</td> <td style="text-align: center;">45,000</td> </tr> <tr> <td>COMC</td> <td style="text-align: center;">1</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	45,000	COMB	45,000	COMC	1
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COMA	45,000								
COMB	45,000								
COMC	1								
4.) STATE OR COUNTRY OF INCORPORATION: DE									

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5000 TUXEDO ROAD

CITY/ST/ZIP: TUXEDO, MD 20781

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: STEPHEN NEAL
TITLE: PRESIDENT
ADDRESS: 5000 TUXEDO ROAD
CITY/ST/ZIP/CO: HYATTSVILLE, MD 20781 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: WILLIAM CATERHAM
TITLE: VICE PRESIDENT
ADDRESS: 5000 TUXEDO RD
CITY/ST/ZIP/CO: HYATTSVILLE, MD 20781 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
| NAME: JACK CLAUNCH
TITLE: VICE PRESIDENT
ADDRESS: 5000 TUXEDO RD
CITY/ST/ZIP/CO: HYATTSVILLE, MD 20781 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
| NAME: RODERICK PATTON
TITLE: VICE PRESIDENT
ADDRESS: 5000 TUXEDO RD
CITY/ST/ZIP/CO: HYATTSVILLE, MD 20781 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
| NAME: SHARON CALOMESE
TITLE: S/T
ADDRESS: 5000 TUXEDO ROAD
CITY/ST/ZIP/CO: HYATTSVILLE, MD 20781 | <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/ SHARON CALOMESE	SHARON CALOMESE, S/T	12/27/2012
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.