

1.) CORPORATION NAME:

**MORGAN CORP. OF SOUTH CAROLINA (USED IN VA
BY:MORGAN CORP.)**

DUE DATE: **3/31/2013**

SCC ID NO: **F1067265**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

SC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1800 EAST MAIN ST

CITY/ST/ZIP: DUNCAN, SC 29334

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:	TIMOTHY C HALLIGAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 3555		
CITY/ST/ZIP/CO:	SPARTANBURG, SC 29304		

NAME:	RITA D BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP FIN/SEC/T		
ADDRESS:	P O BOX 3555		
CITY/ST/ZIP/CO:	SPARTANBURG, SC 29304		

NAME:	THOMAS L HARRILL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	PO BOX 430130		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28269		

NAME:	JAMES D LYNCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	P O BOX 480130		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 29269		

NAME:	ROBERT P. MINA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	P O BOX 3555		
CITY/ST/ZIP/CO:	SPARTANBURG, SC 29304		

NAME:	STEWART H JOHNSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	PO BOX 3555		
CITY/ST/ZIP/CO:	SPARTANBURG, SC 29304		

NAME: DAVID G JOHNSON TITLE: CEO ADDRESS: PO BOX 3555 CITY/ST/ZIP/CO: SPARTANBURG, SC 29304	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: A. E. Applebaum TITLE: VICE PRESIDENT ADDRESS: P. O. Box 3555 CITY/ST/ZIP/CO: Spartanburg, SC 29304	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ TIMOTHY C HALLIGAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TIMOTHY C HALLIGAN, PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/5/2013 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.