

1.) CORPORATION NAME:

Bahnson, Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1082231**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3901 WESTPOINT BLVD

CITY/ST/ZIP: WINSTON SALEM, NC 27103

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 J WHITENER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3901 WEST POINT BLVD		
CITY/ST/ZIP/CO:	WINSTON SALEM, NC 27103		

NAME:	JOSEPH KEANE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3901 WESTPOINT BLVD		
CITY/ST/ZIP/CO:	SUITE 100 WINSTON-SALEM, NC 27103		

NAME:	MAXINE MAURICIO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	301 MERRITT SEVEN		
CITY/ST/ZIP/CO:	6TH FLOOR NORWALK, CT 06851		

NAME:	DOUGLAS MYERS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	301 MERRITT SEVEN		
CITY/ST/ZIP/CO:	6TH FLOOR NORWALK, CT 06851		

NAME:	JOHN D CANUP	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	3901 WESTPOINT BLVD		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27103		

NAME:	RAY COLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	3901 WESTPOINT BLVD.		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27103		

NAME: LISA J CUNNINGHAM TITLE: CFO ADDRESS: 3901 WESTPOINT BLVD CITY/ST/ZIP/CO: WINSTON SALEM, NC 27103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JAMES P HUTCHERSON TITLE: SECRETARY ADDRESS: 3901 WESTPOINT BLVD CITY/ST/ZIP/CO: WINSTON SALEM, NC 27103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ANTHONY TRIANO TITLE: DIRECTOR ADDRESS: 301 MERRITT SEVEN CITY/ST/ZIP/CO: 6TH FLOOR NORWALK, CT 06851	<input 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/ MAXINE MAURICIO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MAXINE MAURICIO, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	8/15/2013 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.		