

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213538869
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1.) CORPORATION NAME: The Capital Group Companies, Inc.	DUE DATE: 9/30/2013								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA	SCC ID NO: F1117169								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION								
4.) STATE OR COUNTRY OF INCORPORATION: DE	<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: right;">12,000,000</td> </tr> <tr> <td>COMB</td> <td style="text-align: right;">1,000,000</td> </tr> <tr> <td>PREFER</td> <td style="text-align: right;">1,500,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	12,000,000	COMB	1,000,000	PREFER	1,500,000
CLASS	AUTHORIZED								
COMA	12,000,000								
COMB	1,000,000								
PREFER	1,500,000								

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 333 SOUTH HOPE STREET 55TH FLOOR

CITY/ST/ZIP: LOS ANGELES, CA 90071

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: PHILIP DE TOLEDO TITLE: PRESIDENT ADDRESS: 333 SOUTH HOPE ST CITY/ST/ZIP/CO: LOS ANGELES, CA 90071	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME: JULIE ST JOHN TITLE: SR VP/CIO ADDRESS: 333 SOUTH HOPE ST CITY/ST/ZIP/CO: 55TH FLOOR LOS ANGELES, CA 90071	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: THOMAS J CONDON TITLE: VP/TREAS ADDRESS: 333 S HOPE ST 55TH FLR CITY/ST/ZIP/CO: LOS ANGELES, CA 90071-1447	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME: BRUCE E MEIKLE TITLE: SR VP & PFO ADDRESS: 333 SOUTH HOPE STREET 55TH FLOOR CITY/ST/ZIP/CO: LOS ANGELES, CA 90071	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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NAME: JAMES P RYAN TITLE: SR VP/S ADDRESS: 333 SOUTH HOPE ST CITY/ST/ZIP/CO: 33RD FLOOR LOS ANGELES, CA 90071	<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/ JAMES P RYAN	JAMES P RYAN, SR VP/S	8/20/2013
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.