

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214545379

1.) CORPORATION NAME:

KEYSTONE AUTOMOTIVE INDUSTRIES, INC.

DUE DATE: **10/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1161068**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000,000
PREFER	3,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 W MADISON ST
STE 2800

CITY/ST/ZIP: CHICAGO, IL 60661

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT L WAGMAN		
TITLE:	PRESIDENT		
ADDRESS:	500 W MADISON ST STE 2800 CHICAGO, IL 60661		
CITY/ST/ZIP/CO:			

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	VICTOR M. CASINI		
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W MADISON ST STE 2800 CHICAGO, IL 60661		
CITY/ST/ZIP/CO:			

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL S CLARK		
TITLE:	VP-FIN/CONT/T		
ADDRESS:	500 W MADISON ST STE 2800 CHICAGO, IL 60661		
CITY/ST/ZIP/CO:			

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WALTER P. HANLEY		
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W MADISON ST STE 2800 CHICAGO, IL 60661		
CITY/ST/ZIP/CO:			

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	VAUGHN HOOKS		
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W. MADISON ST. STE. 2800 CHICAGO, IL 60661		
CITY/ST/ZIP/CO:			

NAME:	JOHN S QUINN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W MADISON ST		
	STE 2800		
CITY/ST/ZIP/CO:	CHICAGO, IL 60661		

NAME:	MATTHEW MCKAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	500 W. MADISON STREET		
	SUITE 2800		
CITY/ST/ZIP/CO:	CHICAGO, IL 60661		

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/ MATTHEW MCKAY	MATTHEW MCKAY, SECRETARY	10/1/2014
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.