

1.) CORPORATION NAME:

DUE DATE: **12/31/2012**

G M R Aerial Surveys, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1199449**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
KY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 523 WELLINGTON WAY

CITY/ST/ZIP: LEXINGTON, KY 40503

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.

<p>NAME: G MICHAEL RITCHIE TITLE: PRESIDENT ADDRESS: 523 WELLINGTON WAY CITY/ST/ZIP/CO: LEXINGTON, KY 40503</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: KURT W ALLEN TITLE: VICE PRESIDENT ADDRESS: 4801 TELSIA DRIVE STE J CITY/ST/ZIP/CO: BOWIE, MD 20715</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: GARY R FLORENCE TITLE: VICE PRESIDENT ADDRESS: 10033 MLK STREET N, SUITE 200 CITY/ST/ZIP/CO: ST. PETERSBURG, FL 33716</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL B SHILLENN TITLE: VICE PRESIDENT ADDRESS: 104 SOUTH CHURCH STREET CITY/ST/ZIP/CO: WEST CHESTER, PA 19382</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY S SIMMONS TITLE: VICE PRESIDENT ADDRESS: 1410 INDIAN TRAIL ROAD CITY/ST/ZIP/CO: NORCROSS, GA 30093</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ROBERT J HICKEY TITLE: SR. VICE PRESID ADDRESS: 104 SOUTH CHURCH STREET CITY/ST/ZIP/CO: WEST CHESTER, PA 19382</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK E MEADE SR. VICE PRESID 523 WELLINGTON WAY LEXINGTON, KY 40503	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DERRICK A RITCHIE SECRETARY 523 WELLINGTON WAY LEXINGTON, KY 40503	<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/ G MICHAEL RITCHIE	G MICHAEL RITCHIE, PRESIDENT	10/23/2012
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.