

1.) CORPORATION NAME:

**WAGMAN CONSTRUCTION, INC.**

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER  
1111 EAST MAIN STREET**

SCC ID NO: **F1223173**

**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:

**PA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 231 N GEORGE ST

CITY/ST/ZIP: YORK, PA 17401

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:	KEVIN M SNOKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	390 CHRISLENA LANE		
CITY/ST/ZIP/CO:	WEST CHESTER, PA 19380		

NAME:	MICHAEL B GLEZER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	2784 FARNHAM LANE		
CITY/ST/ZIP/CO:	YORK, PA 17408		

NAME:	RICHARD E WAGMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SENIOR VP		
ADDRESS:	1190 OVERBROOK CIRCLE		
CITY/ST/ZIP/CO:	YORK, PA 17403		

NAME:	JOHN R COPPAGE IV	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP/CFO/TREAS		
ADDRESS:	1116 N WYNDHAM DR		
CITY/ST/ZIP/CO:	YORK, PA 17403		

NAME:	JOSEPH G WAGMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN/CEO		
ADDRESS:	975 SUMMIT CIRCLE NORTH		
CITY/ST/ZIP/CO:	YORK, PA 17403		

NAME:	W. EDWIN JACKSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	314 EQUUS DRIVE		
CITY/ST/ZIP/CO:	CAMP HILL, PA 17011		

NAME: TAMMY P KING TITLE: SECRETARY ADDRESS: 176 NORTH SECOND STREET CITY/ST/ZIP/CO: MT. WOLF, PA 17347	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Donna M Chandler TITLE: ASST SECRETARY ADDRESS: 229 Glenvue Road CITY/ST/ZIP/CO: Glen Rock, VA 17327	<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/ W. EDWIN JACKSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	W. EDWIN JACKSON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	7/31/2013 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.