

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215544950
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1.) CORPORATION NAME: PIONEER ASSOCIATES, INC.	DUE DATE: 10/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: BUSINESS FILINGS INCORPORATED 4701 COX ROAD, STE. 285 GLEN ALLEN, VA	SCC ID NO: F1227398				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: NY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2119 E DIXON BLVD
PO BOX 2367

CITY/ST/ZIP: SHELBY, NC 28151-2367

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: ANDREW WILLIAMS TITLE: PRESIDENT ADDRESS: 2125 CENTER AVE. CITY/ST/ZIP/CO: FORT LEE, NJ 07024	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: A. TARANTO TITLE: ASST SECR ADDRESS: 2119 E DIXON BLVD CITY/ST/ZIP/CO: SHELBY, NC 28151-2367	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: RICK FALLS TITLE: SECRETARY ADDRESS: 2119 E DIXON BLVD CITY/ST/ZIP/CO: SHELBY, NC 28151-2367	<input checked="" type="checkbox"/> OFFICER	<input checked="" 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/ A. TARANTO	A. TARANTO, ASST SECR	12/21/2015
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.