

1.) CORPORATION NAME: PROFESSIONAL TRANSPORTATION, INC.	DUE DATE: 6/30/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL REGISTERED AGENTS INC 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA	SCC ID NO: F1252362				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: IN	<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: 3700 EAST MORGAN AVENUE

CITY/ST/ZIP: EVANSVILLE, IN 47715

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: RONALD D ROMAIN		
TITLE: PRESIDENT		
ADDRESS: 3700 EAST MORGAN AVENUE		
CITY/ST/ZIP/CO: EVANSVILLE, IN 47715		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CONNIE S ROMAIN		
TITLE: TREASURER		
ADDRESS: 3700 E MORGAN AVENUE		
CITY/ST/ZIP/CO: EVANSVILLE, IN 47715		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: AMY B BARRON		
TITLE: SECRETARY		
ADDRESS: 3700 E MORGAN AVENUE		
CITY/ST/ZIP/CO: EVANSVILLE, IN 47715		

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/ RONALD D ROMAIN	RONALD D ROMAIN, PRESIDENT	5/3/2015
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.