

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	213511128								
1.) CORPORATION NAME: <b>R.W. SCOBIE, INC.</b>		DUE DATE: <b>4/30/2013</b>								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>REGISTERED AGENT SOLUTIONS, INC. 7288 HANOVER GREEN DRIVE MECHANICSVILLE, VA 23111</b>		SCC ID NO: <b>F1312497</b>								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HANOVER COUNTY</b>		5.) STOCK INFORMATION								
4.) STATE OR COUNTRY OF INCORPORATION: <b>WI</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMAV</td> <td style="text-align: center;">9,001</td> </tr> <tr> <td>COMBNV</td> <td style="text-align: center;">6,000</td> </tr> <tr> <td>COME</td> <td style="text-align: center;">999</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMAV	9,001	COMBNV	6,000	COME	999
CLASS	AUTHORIZED									
COMAV	9,001									
COMBNV	6,000									
COME	999									
6.) PRINCIPAL OFFICE ADDRESS:										
ADDRESS: 3300 BIRCH ST CITY/ST/ZIP: EAU CLAIRE, WI 54703										
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: ROBERT GILES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR								
TITLE: PRESIDENT										
ADDRESS: 4412 WOODBRIDGE DR										
CITY/ST/ZIP/CO: EAU CLAIRE, WI 54701										
NAME: DIRK NOHRE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR								
TITLE: VICE PRESIDENT										
ADDRESS: 4228 SOUTHTOWNE DR										
CITY/ST/ZIP/CO: EAU CLAIRE, WI 54703										
NAME: PETER SCOBIE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR								
TITLE: CHAIRMAN										
ADDRESS: 685 SCOBIE LANE										
CITY/ST/ZIP/CO: EAU CLAIRE, WI 54703										
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/ ROBERT GILES	ROBERT GILES, PRESIDENT	3/4/2013								
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.										