

1.) CORPORATION NAME:

Zachry Industrial, Inc.

DUE DATE: **9/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1351974**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 527 LOGWOOD

CITY/ST/ZIP: SAN ANTONIO, TX 78221

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: STEVEN K BRAUER TITLE: GROUP PRES. ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: RALPH J BIEDIGER TITLE: GROUP PRES. ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JOE J LOZANO TITLE: VICE PRESIDENT ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOE J LOZANO TITLE: EX. VP ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: D KIRK MCDONALD TITLE: EX. VP ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DWIGHT MUNK TITLE: TREASURER ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: COLLEEN M GOFF TITLE: SECRETARY ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN B ZACHRY TITLE: CEO ADDRESS: 527 LOGWOOD CITY/ST/ZIP/CO: SAN ANTONIO, TX 78221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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/ JOE J LOZANO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOE J LOZANO, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	11/12/2015 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.		