

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215537630
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1.) CORPORATION NAME: WAGNER FRAMING COMPANY	DUE DATE: 10/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ROBERT B KRAFT 38105 LONG LN LOVETTSVILLE, VA	SCC ID NO: F1443730				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY	5.) STOCK INFORMATION <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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: MD					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 36 BLOOMINGDALE AVE CITY/ST/ZIP: CATONSVILLE, MD 21228	
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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 B KRAFT TITLE: PRESIDENT ADDRESS: 38105 LONG LN CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: LISA A KRAFT TITLE: SECRETARY ADDRESS: 38105 LONG LN CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180	<input checked="" type="checkbox"/> OFFICER	<input 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/ ROBERT B KRAFT	ROBERT B KRAFT, PRESIDENT	10/13/2015
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.