

1.) CORPORATION NAME:

THE BARTECH GROUP, INC.

DUE DATE: **11/30/2010**

SCC ID NO: **F1450420**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 17199 N LAUREL PARK DR SUITE 224

CITY/ST/ZIP: LIVONIA, MI 48152-

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: JON E BARFIELD
TITLE: PRESIDENT
ADDRESS: 17199 N. LAUREL PARK DRIVE
SUITE 224
CITY/ST/ZIP/CO: LIVONIA, MI 48152-

OFFICER DIRECTOR

NAME: LEONARD WYDERKO
TITLE: CFO
ADDRESS: 17199 N. LAUREL PARK DRIVE
SUITE 224
CITY/ST/ZIP/CO: LIVONIA, MI 48152-

OFFICER DIRECTOR

NAME: ANDREAN R HORTON
TITLE: SECRETARY
ADDRESS: 17199 N. LAUREL PARK DRIVE
SUITE 224
CITY/ST/ZIP/CO: LIVONIA, MI 48152-

OFFICER DIRECTOR

NAME: JEROME ADAMS
TITLE: DIRECTOR
ADDRESS: 17199 N. LAUREL PARK DRIVE
SUITE 224
CITY/ST/ZIP/CO: LIVONIA, MI 48152-

OFFICER DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HERBERT S AMSTER DIRECTOR 17199 N. LAUREL PARL DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN W BARFIELD DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HAVEN E COCKERHAM DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH J FITZSIMMONS JR DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH J FITZSIMMONS SR DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE F FRANCIS DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, VA 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT E KNOWLING JR DIRECTOR 17199 N. LAUREL PARK DRIVE 224 LIVONIA, VA 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE F RAYMOND DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, MI 48152-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD T WHITE ESQ DIRECTOR 17199 N. LAUREL PARK DRIVE SUITE 224 LIVONIA, VA 48152-	<input 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/ JON E BARFIELD	JON E BARFIELD, PRESIDENT	10/1/2010
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.