

1.) CORPORATION NAME:

RUSSELL CAPITAL INC.

DUE DATE: **7/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1478918**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1301 Second Avenue, FL 18

CITY/ST/ZIP: Seattle, WA 98101

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:	Brian Golob	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		
NAME:	Jean Webber	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		
NAME:	Carla L. Anderson	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		
NAME:	Kenneth W. Willman	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		
NAME:	Rick Chase	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		
NAME:	H. Victor Leverett	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		

NAME:	Derek Williams	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1301 Second Avenue, FL 18		
CITY/ST/ZIP/CO:	Seattle, WA 98101		

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.

<u>/s/ Carla L. Anderson</u>	<u>Carla L. Anderson, ASST</u>	<u>6/6/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.