

1.) CORPORATION NAME:

**Rich Products Corporation**

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1492893**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE ROBERT RICH WAY

CITY/ST/ZIP: BUFFALO, NY 14213

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:	WILLIAM G GISEL JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		
NAME:	JILL BOND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		
NAME:	JAMES DEUSCHLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC. VP		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		
NAME:	MAUREEN HURLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC. VP		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		
NAME:	MARY PAT O'CONNOR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		
NAME:	JOHN P DOUGHERTY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	ONE ROBERT RICH WAY		
CITY/ST/ZIP/CO:	BUFFALO, NY 14213		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MELINDA R RICH VICE CHAIRMAN ONE ROBERT RICH WAY BUFFALO, NY 14213	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT E RICH JR CHAIRMAN ONE ROBERT RICH WAY BUFFALO, NY 14213	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM E GRIESHOBER, JR. ASST SECRETARY ONE ROBERT RICH WAY BUFFALO, NY 14213	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JONATHAN GOLDEN DIRECTOR ONE ROBERT RICH WAY BUFFALO, NY 14213	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Vicki D. Rich DIRECTOR One Robert Rich Way Buffalo, NY 14213	<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/ WILLIAM E GRIESHOBER, JR. SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	WILLIAM E GRIESHOBER, JR., ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	1/6/2014 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.			