

1.) CORPORATION NAME:

Trafford Corporation

DUE DATE: **1/31/2012**

SCC ID NO: **F1495946**

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

AUTH IN VI

**NATIONAL REGISTERED AGENTS, INC.
4001 NORTH NINTH STREET, SUITE 227
ARLINGTON, VA 22203**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	1,000
COMNV	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 550 FIFTH ST EXTENSION

CITY/ST/ZIP: TRAFFORD, PA 15085-

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: LEE ROBBINS
TITLE: PRESIDENT
ADDRESS: 550 FIFTH STREET EXTENSION
CITY/ST/ZIP/CO: TRAFFORD, PA 15085-

OFFICER

DIRECTOR

NAME: MICHAEL J GIARRATANO
TITLE: EXECUTIVE VP
ADDRESS: 100 MARCUS BLD
CITY/ST/ZIP/CO: HAUPPAUGE, NY 11788-

OFFICER

DIRECTOR

NAME: RICHARD C WEYER
TITLE: EXECUTIVE VP
ADDRESS: 550 FIFTH STREET EXTENSION
CITY/ST/ZIP/CO: TRAFFORD, PA 15085-

OFFICER

DIRECTOR

NAME: LORI PINDER
TITLE: SECRETARY
ADDRESS: 4400 POST OAK PARKWAY
STE 1000
CITY/ST/ZIP/CO: HOUSTON, TX 77027-

OFFICER

DIRECTOR

NAME: WILLIAM MCDUGALL
TITLE: CFO/TREAS/AS
ADDRESS: PO BOX 15505
CITY/ST/ZIP/CO: PITTSBURGH, PA 15244-

OFFICER

DIRECTOR

NAME: JEFFERY J BORCHERS TITLE: TREASURER ADDRESS: 4400 POST OAK PARKWAY STE 1000 CITY/ST/ZIP/CO: HOUSTON, TX 77027-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MICHAEL J GIARRATANO TITLE: DIRECTOR ADDRESS: 100 MARCUS BLVD STE 1 CITY/ST/ZIP/CO: HAUPPAUGE, NY 11788-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JAMES L GIBSON TITLE: DIRECTOR ADDRESS: 4400 POST OAK PARKWAY STE 1000 CITY/ST/ZIP/CO: HOUSTON, TX 77027-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: WILLIAM MCDUGALL TITLE: DIRECTOR ADDRESS: 5631 STEUBENVILLE PIKE CITY/ST/ZIP/CO: MCKEES ROCK, PA 15136-	<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/ LORI PINDER	LORI PINDER, SECRETARY	1/26/2012
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.		