

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214512783

1.) CORPORATION NAME:

Ashworth Bros., Inc.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1508482**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 10,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 222 MILLIKEN BLVD
SUITE 7

CITY/ST/ZIP: FALL RIVER, MA 02721

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: | VINCENT L. MORETTI | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | P/CEO | | |
| ADDRESS: | 20129 BLACK DIAMOND PLACE | | |
| CITY/ST/ZIP/CO: | ASHBURN, VA 20147 | | |

| | | | |
|-----------------|---------------------|---|--|
| NAME: | ASA E PHILLIPS III | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 20 WILLIAM ST | | |
| CITY/ST/ZIP/CO: | WELLESLEY, MA 02481 | | |

| | | | |
|-----------------|------------------|---|-----------------------------------|
| NAME: | JOSEPH M LACKNER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VP SALES & MKTG | | |
| ADDRESS: | P.O. BOX 37 | | |
| CITY/ST/ZIP/CO: | HAMEL, MN 55340 | | |

| | | | |
|-----------------|-----------------------|---|-----------------------------------|
| NAME: | PAUL B. NUNES | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VP OF FINANCE | | |
| ADDRESS: | 145 SPRING GREEN ROAD | | |
| CITY/ST/ZIP/CO: | WARWICK, RI 02888 | | |

| | | | |
|-----------------|-------------------|---|-----------------------------------|
| NAME: | PAMELA J COPELAND | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | ASST SECRETARY | | |
| ADDRESS: | 132 BROADWAY | | |
| CITY/ST/ZIP/CO: | TAUNTON, MA 02780 | | |

| | | | |
|-----------------|--------------------|----------------------------------|--|
| NAME: | HENRY ASHWORTH | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | P O BOX 3615 | | |
| CITY/ST/ZIP/CO: | WESTPORT, MA 02790 | | |

| | | | |
|--|----------------------------------|----------------------------------|--|
| NAME: | ROBERT C ASHWORTH III | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 200 ROSEMARY LANE | | |
| CITY/ST/ZIP/CO: | GREENVILLE, SC 29615 | | |
| 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/ PAUL B. NUNES | PAUL B. NUNES, VP OF FINANCE | 3/10/2014 | |
| 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. | | | |