

1.) CORPORATION NAME:

**GS ADMINISTRATORS, INC.**

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1526542**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1345 ENCLAVE PKWY

CITY/ST/ZIP: HOUSTON, TX 77077

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.

<p>NAME: STEPHEN L AMOS TITLE: PRESIDENT/DIR ADDRESS: 1345 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DIANNA DRYER TITLE: VICE PRESIDENT ADDRESS: 1345 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DIANE W GREENE TITLE: VP LA/SEC ADDRESS: 1345 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ROBERT HEHR TITLE: VICE PRESIDENT ADDRESS: 1345 ENCLAVE PARKWAY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: BRUCE STRICKLIN TITLE: VICE PRESIDENT ADDRESS: 1345 ENCLAVE PARKWAY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ANA DUNKEL TITLE: TREASURER ADDRESS: 1375 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: JERRY H PYLE TITLE: DIRECTOR ADDRESS: 1375 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: KIMBERLEY A JACOBSON TITLE: ASST SECRETARY ADDRESS: 1375 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MARCUS A WATTS TITLE: DIRECTOR ADDRESS: 1345 ENCLAVE PKWY CITY/ST/ZIP/CO: HOUSTON, TX 77077	<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/ DIANE W GREENE	DIANE W GREENE, VP LA/SEC	10/21/2013
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.		