

1.) CORPORATION NAME:

DUE DATE: **7/31/2013**

ltron, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1595588**

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	75,000,000
PREFER	10,000,000

GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2111 N MOLTER RD

CITY/ST/ZIP: LIBERTY LAKE, WA 99019

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:	PHILIP C MEZEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	2111 NORTH MOLTER ROAD		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME:	STEVEN M HELMBRECHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/CFO		
ADDRESS:	2111 N MOLTER ROAD		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME:	SHANNON M VOTAVA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2111 N MOLTER RD		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME:	KIRBY DYESS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2111 NORTH MOLTER RD.		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME:	JON ELIASSEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2111 N MOLTER RD		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME:	CHARLES GAYLORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2111 N MOLTER RD.		
CITY/ST/ZIP/CO:	LIBERTY LAKE, WA 99019		

NAME: THOMAS GLANVILLE TITLE: DIRECTOR ADDRESS: 2111 N MOLTER RD CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHARON NELSON TITLE: DIRECTOR ADDRESS: 2111 N MOLTER RD CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LYNDA L ZIEGLER TITLE: DIRECTOR ADDRESS: 2111 NORTH MOLTER RD. CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GARY PRUITT TITLE: DIRECTOR ADDRESS: 2111 N MOLTER RD CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GRAHAM M WILSON TITLE: DIRECTOR ADDRESS: 2111 N MOLTER ROAD CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN W HOLLERAN TITLE: EXEC VP AND COO ADDRESS: 2111 NORTH MOLTER ROAD CITY/ST/ZIP/CO: LIBERTY LAKE, WA 99019	<input checked="" type="checkbox"/> OFFICER	<input 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/ SHANNON M VOTAVA SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SHANNON M VOTAVA, SECRETARY PRINTED NAME AND CORPORATE TITLE	7/2/2013 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.		