

| 1.) CORPORATION NAME:<br><b>W. S. Badcock Corporation</b>  | DUE DATE: <b>3/31/2016</b>   |       |            |      |       |      |         |
|--|--|-------|------------|------|-------|------|---------|
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CT CORPORATION SYSTEM<br/>4701 COX ROAD, SUITE 285<br/>GLEN ALLEN, VA</b> | SCC ID NO: <b>F1621566</b>   |       |            |      |       |      |         |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HENRICO COUNTY</b>   | 5.) STOCK INFORMATION  |       |            |      |       |      |         |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>FL</b>  | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td style="text-align: center;">5,000</td> </tr> <tr> <td>COMB</td> <td style="text-align: center;">350,000</td> </tr> </tbody> </table> | CLASS | AUTHORIZED | COMA | 5,000 | COMB | 350,000 |
| CLASS  | AUTHORIZED   |       |            |      |       |      |         |
| COMA   | 5,000  |       |            |      |       |      |         |
| COMB   | 350,000  |       |            |      |       |      |         |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 200 N PHOSPHATE BLVD  
P O BOX 497

CITY/ST/ZIP: MULBERRY, FL 33860

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: MICHAEL J PRICE<br>TITLE: PRESIDENT<br>ADDRESS: 200 N PHOSPHATE BLVD<br>CITY/ST/ZIP/CO: MULBERRY, FL 33860 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|--|-------------------------------------|---------|-------------------------------------|----------|

|   |                                     |         |                                     |          |
|---|-------------------------------------|---------|-------------------------------------|----------|
| NAME: WOGAN S BADCOCK<br>TITLE: VICE PRESIDENT<br>ADDRESS: 200 N PHOSPHATE BLVD<br>CITY/ST/ZIP/CO: MULBERRY, FL 33860 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|-------------------------------------|----------|

|   |                                     |         |                          |          |
|---|-------------------------------------|---------|--------------------------|----------|
| NAME: PHILIP BAYT<br>TITLE: VICE PRESIDENT<br>ADDRESS: 200 N PHOSPHATE BLVD<br>CITY/ST/ZIP/CO: MULBERRY, FL 33860 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|--------------------------|----------|

|   |                                     |         |                          |          |
|---|-------------------------------------|---------|--------------------------|----------|
| NAME: ROBERT B BURNETTE<br>TITLE: VICE PRESIDENT<br>ADDRESS: 200 N PHOSPHATE BLVD<br>CITY/ST/ZIP/CO: MULBERRY, FL 33860 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
|---|-------------------------------------|---------|--------------------------|----------|

|  |                                     |         |                          |          |
|--|-------------------------------------|---------|--------------------------|----------|
| NAME: STEPHEN N BARGAMIN<br>TITLE: SRVP & CFO<br>ADDRESS: 200 N PHOSPHATE BLVD<br>CITY/ST/ZIP/CO: MULBERRY, FL 33860 | <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/ STEPHEN N BARGAMIN                              | STEPHEN N BARGAMIN, SRVP & CFO   | 1/28/2016 |
| 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.