

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213534321

1.) CORPORATION NAME:

**DUCKS UNLIMITED, INC.**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1639576**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 WATERFOWL WAY

CITY/ST/ZIP: MEMPHIS, TN 38120

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.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JOHN W NEWMAN				
TITLE:	CHAIRMAN				
ADDRESS:	1001 OCHSHER BLVD SUITE 200				
CITY/ST/ZIP/CO:	COVINGTON, LA 70433				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	GEORGE DUNKLIN, JR				
TITLE:	PRESIDENT				
ADDRESS:	620 E 22ND STREET				
CITY/ST/ZIP/CO:	SUITE 206 STUTTGART, AR 72160				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	RANDY L GRAVES				
TITLE:	ASST TREASURER				
ADDRESS:	ONE WATERFOWL WAY				
CITY/ST/ZIP/CO:	MEMPHIS, TN 38120				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	ROBERT S HESTER				
TITLE:	TREASURER				
ADDRESS:	DELOITTE LLP				
CITY/ST/ZIP/CO:	100 PEABODY PLACE, #800 MEMPHIS, TN 38103				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	JIM FLOOD				
TITLE:	ASST SECRETARY				
ADDRESS:	ONE WATERFOWL WAY				
CITY/ST/ZIP/CO:	MEMPHIS, TN 38120				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	DALE HALL				
TITLE:	CEO				
ADDRESS:	ONE WATERFOWL WAY				
CITY/ST/ZIP/CO:	MEMPHIS, TN 38120				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN R POPE OFFICER 3866 MARINE PLACE JACKSONVILLE, FL 32223	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAN THIEL EXEC SECRETARY ONE WATERFOWL WAY MEMPHIS, TN 38120	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL R BONDERSON, JR VICE PRESIDENT 8121 ALPHA LANE SUNOL, CA 94586	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DAN THIEL	DAN THIEL, EXEC SECRETARY	7/24/2013
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.