

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215511533

1.) CORPORATION NAME:

DUE DATE: **3/31/2015**

CompWorks, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1660341**

**ROBERT M. SOMER
8303 ARLINGTON BLVD
STE 102**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

FAIRFAX, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1390 RIDGEVIEW DR

CITY/ST/ZIP: ALLENTOWN, PA 18104

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: | ANTHONY J SALVAGGIO | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 1390 RIDGEVIEW DR | | |
| CITY/ST/ZIP/CO: | ALLENTOWN, PA 18104 | | |

| | | | |
|-----------------|----------------------|---|-----------------------------------|
| NAME: | THOMAS A SALVAGGIO | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 1390 RIDGEVIEW DRIVE | | |
| CITY/ST/ZIP/CO: | ALLENTOWN, PA 18104 | | |

| | | | |
|-----------------|---------------------|---|-----------------------------------|
| NAME: | ANDREW P MCINTYRE | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 1390 RIDGEVIEW DR | | |
| CITY/ST/ZIP/CO: | ALLENTOWN, PA 18104 | | |

| | | | |
|-----------------|---------------------|---|--|
| NAME: | NORENE SALVAGGIO | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 1390 RIDGEVIEW RD | | |
| CITY/ST/ZIP/CO: | ALLENTOWN, PA 18104 | | |

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.

| | | |
|---|---|------------------|
| <u>/s/ ANDREW P MCINTYRE</u> | ANDREW P MCINTYRE, | <u>3/26/2015</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | TREASURER 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.