

1.) CORPORATION NAME:

CMIC Specialty Services, Inc.

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER
1111 EAST MAIN STREET**

SCC ID NO: **F1661612**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

WI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3000 SCHUSTER LN

CITY/ST/ZIP: MERRILL, WI 54452

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 E RAVN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3000 SCHUSTER LN		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME:	RANDY BRANDNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3000 SCHUSTER LN		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME:	MARK STEINBERG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3000 SCHUSTER LANE		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME:	HERMAN VANDENBERG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	3000 SCHUSTER LN		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME:	Cynthia Brandt	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3000 SCHUSTER LN		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME:	MICHAEL W GREBE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3000 SCHUSTER LN		
CITY/ST/ZIP/CO:	MERRILL, WI 54452		

NAME: MARSHA A LINDSAY TITLE: DIRECTOR ADDRESS: 3000 SCHUSTER LN CITY/ST/ZIP/CO: MERRILL, WI 54452	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GERALD WHITBURN TITLE: DIRECTOR ADDRESS: 3000 SCHUSTER LN CITY/ST/ZIP/CO: MERRILL, WI 54452	<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/ HERMAN VANDENBERG SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	HERMAN VANDENBERG, TREASURER PRINTED NAME AND CORPORATE TITLE	1/31/2014 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.		