

1.) CORPORATION NAME:

DUE DATE: **5/31/2014**

Converse Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1668112**

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 HIGH ST

CITY/ST/ZIP: NORTH ANDOVER, MA 01845-2601

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:	JAMES A. CALHOUN, JR.	
TITLE:	PRESIDENT & CEO	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ANN M. MILLER	
TITLE:	VP/SECRETARY	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GRANT W. HANSON	
TITLE:	DIR & ASST SEC	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT W. WOODRUFF	
TITLE:	DIR & TREASURER	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN F. COBURN III	
TITLE:	ASST SECRETARY	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MELISSA DUGAN	
TITLE:	ASST SECRETARY	
ADDRESS:	ONE HIGH STREET	
CITY/ST/ZIP/CO:	NORTH ANDOVER, MA 01845	

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/ ANN M. MILLER	ANN M. MILLER, VP/SECRETARY	5/28/2014
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.		