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| <b>SCC eFile</b> | <b>2015 ANNUAL REPORT<br/>COMMONWEALTH OF VIRGINIA<br/>STATE CORPORATION COMMISSION</b> | 215527598 |
|------------------|-----------------------------------------------------------------------------------------|-----------|

|                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                  |       |            |        |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------|--------|-------|
| 1.) CORPORATION NAME:<br><b>W. A. KENDALL AND COMPANY, INC.</b><br>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CT CORPORATION SYSTEM<br/>         4701 COX ROAD, SUITE 285<br/>         GLEN ALLEN, VA</b><br>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HENRICO COUNTY</b><br>4.) STATE OR COUNTRY OF INCORPORATION:<br><b>GA</b> | DUE DATE: <b>8/31/2015</b><br>SCC ID NO: <b>F1680059</b><br>5.) STOCK INFORMATION<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS                                                                                                                                                                                                                                                                                                                                                | AUTHORIZED                                                                                                                                                                                                                                                                                       |       |            |        |       |
| COMMON                                                                                                                                                                                                                                                                                                                                               | 1,000                                                                                                                                                                                                                                                                                            |       |            |        |       |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 831  
 CITY/ST/ZIP: LAWRENCEVILLE, GA 30046

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: ROBERT WILLIAMS<br>TITLE: VICE PRESIDENT<br>ADDRESS: PO BOX 831<br>CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30046 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
|------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------|--|

|                                                                                                             |                                             |                                              |  |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------|--|
| NAME: WARREN A KENDALL<br>TITLE: DIRECTOR<br>ADDRESS: PO BOX 831<br>CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30046 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------|--|

|                                                                                                              |                                             |                                              |  |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------|--|
| NAME: REBECCA S KENDALL<br>TITLE: DIRECTOR<br>ADDRESS: PO BOX 831<br>CITY/ST/ZIP/CO: LAWRENCEVILLE, GA 30046 | <input checked="" 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/ REBECCA S KENDALL                               | REBECCA S KENDALL, DIRECTOR      | 7/23/2015 |
| 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.