

1.) CORPORATION NAME:

Crafton, Tull & Associates, Inc.

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1702481**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

AR

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 901 N 47TH STREET
STE 200

CITY/ST/ZIP: ROGERS, AR 72756

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:	MATT CRAFTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	901 N 47TH STREET STE 200		
CITY/ST/ZIP/CO:	ROGERS, AR 72756		

NAME:	PHIL HAGEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	214 E MAIN STREET		
CITY/ST/ZIP/CO:	OKLAHOMA CITY, OK 73104		

NAME:	LANE HOUSLEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	170 COMMERCE ROAD		
CITY/ST/ZIP/CO:	BLDG 201 CONWAY, AR 72032		

NAME:	JERRY KELSO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	10825 FINANCIAL CENTRE PKWY STE 300		
CITY/ST/ZIP/CO:	LITTLE ROCK, AR 72211		

NAME:	CHUCK MITCHELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	220 E 8TH ST		
CITY/ST/ZIP/CO:	TULSA, OK 74119		

NAME: DAVID SWEARINGEN TITLE: SECRETARY ADDRESS: 901 N 47TH STREET STE 200 CITY/ST/ZIP/CO: ROGERS, AR 72756	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES TULL TITLE: TREASURER ADDRESS: 901 N 47TH STREET STE 200 CITY/ST/ZIP/CO: ROGERS, AR 72756	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHANE FERNANDEZ TITLE: EVP ADDRESS: 220 E 8TH ST CITY/ST/ZIP/CO: TULSA, OK 74119	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS HOPPER TITLE: COB ADDRESS: 901 N 47TH STREET STE 200 CITY/ST/ZIP/CO: ROGERS, AR 72756	<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/ JAMES TULL	JAMES TULL, TREASURER	2/8/2013
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.		