

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214542411

1.) CORPORATION NAME:

Woodmen Foundation

DUE DATE: **10/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1726167**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1700 FARNAM ST
STE 2757

CITY/ST/ZIP: OMAHA, NE 68102-2003

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:	S JAMES PATTERSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1700 FARNAM ST STE 2757 OMAHA, NE 68102-2003		

NAME:	LARRY R KING	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/DTR		
ADDRESS:	1700 FARNAM ST STE 2757 OMAHA, NE 68102		

NAME:	ROBERT L MAHER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1700 FARNAM ST STE 2757 OMAHA, NE 68102		

NAME:	JORDAN MAWSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	1700 FARNAM ST STE 2757 OMAHA, NE 68102		

NAME:	PATRICK L DEES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1700 FARNAM ST STE 2757 OMAHA, NE 68102		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANNETTE M DEVINE DIRECTOR 1700 FARNAM ST STE 2757 OMAHA, NE 68102-2003	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WESLEY A DODD JR DIRECTOR 1700 FARNAM ST STE 2757 OMAHA, NE 68102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARYL J DOISE DIRECTOR 1700 FARNAM ST STE 2757 OMAHA, NE 68102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAMELA J HERNANDEZ DIRECTOR 1700 FARNAM ST STE 2757 OMAHA, NE 68102-2003	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN B JONES DIRECTOR 1700 FARNAM ST STE 2757 OMAHA, NE 68102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ JORDAN MAWSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JORDAN MAWSON, ASST TREASURER PRINTED NAME AND CORPORATE TITLE	9/9/2014 DATE
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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.