

1.) CORPORATION NAME:

**Ausdal Financial Partners, Inc.**

DUE DATE: **12/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NORTHWEST REGISTERED AGENT LLC  
4445 CORPORATION LN STE 264  
VIRGINIA BEACH, VA**

SCC ID NO: **F1730847**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5187 UTICA RIDGE RD

CITY/ST/ZIP: DAVENPORT, IA 52807

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.

<p>NAME: ROBERT B AUSDAL JR TITLE: PRESIDENT ADDRESS: 5187 UTICA RIDGE RD CITY/ST/ZIP/CO: DAVENPORT, IA 52807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN HICKS TITLE: VICE PRESIDENT ADDRESS: 5187 UTICA RIDGE RD. CITY/ST/ZIP/CO: DAVENPORT, IA 52807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DAVID ROBERTS TITLE: VICE PRESIDENT ADDRESS: 5187 UTICA RIDGE RD. CITY/ST/ZIP/CO: DAVENPORT, IA 52807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JAMES J SIMPSON TITLE: VICE PRESIDENT ADDRESS: 5187 UTICA RIDGE RD. CITY/ST/ZIP/CO: DAVENPORT, IA 52807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHELLE SWINNEY TITLE: SECRETARY ADDRESS: 5187 UTICA RIDGE RD. CITY/ST/ZIP/CO: DAVENPORT, IA 52807</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: THOMAS HOPKINS TITLE: CHAIRMAN ADDRESS: 220 N. MAIN ST. STE 400 CITY/ST/ZIP/CO: DAVENPORT, IA 52801</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	STEVE SAWTELLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 N. MAIN ST.		
CITY/ST/ZIP/CO:	STE 400 DAVENPORT, IA 52801		

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/ ROBERT B AUSDAL JR	ROBERT B AUSDAL JR,	11/19/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT	DATE
	PRINTED NAME AND CORPORATE TITLE	

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.