

1.) CORPORATION NAME: <b>Carter Goble Associates, Inc.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>SC</b>	DUE DATE: <b>9/30/2012</b> SCC ID NO: <b>F1768706</b> 5.) STOCK INFORMATION <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>500,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	500,000
CLASS	AUTHORIZED				
COMMON	500,000				

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 1619 SUMTER ST CITY/ST/ZIP: COLUMBIA, SC 29201
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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: STEPHEN CARTER TITLE: PRESIDENT ADDRESS: 1619 SUMTER ST CITY/ST/ZIP/CO: COLUMBIA, SC 29201	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: DONALD BOAN TITLE: TREASURER ADDRESS: 1619 SUMTER ST CITY/ST/ZIP/CO: COLUMBIA, SC 29201	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: ROBERT GOBLE TITLE: SECRETARY ADDRESS: 1619 SUMTER ST CITY/ST/ZIP/CO: COLUMBIA, SC 29201	<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/ DONALD BOAN	DONALD BOAN, TREASURER	9/24/2012
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.