

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215540914

1.) CORPORATION NAME:

**Oldcastle Services, Inc.**

DUE DATE: **11/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER, 16TH FLOOR  
1111 EAST MAIN ST.**

SCC ID NO: **F1773441**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	11,111
COMBNV	11,111

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 900 ASHWOOD PKWY, STE 600

CITY/ST/ZIP: ATLANTA, GA 30338

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: KEITH A. HAAS  OFFICER  DIRECTOR  
 TITLE: PRESIDENT  
 ADDRESS: 900 ASHWOOD PKWY, STE 600  
 CITY/ST/ZIP/CO: ATLANTA, GA 30338

NAME: CHARLES BROWN  OFFICER  DIRECTOR  
 TITLE: ASST SEC/DIREC  
 ADDRESS: 900 ASHWOOD PKWY, STE 600  
 CITY/ST/ZIP/CO: ATLANTA, GA 30338

NAME: PAUL R. VALENTINE  OFFICER  DIRECTOR  
 TITLE: DIREC/SECRETARY  
 ADDRESS: 900 ASHWOOD PKWY, STE 600  
 CITY/ST/ZIP/CO: ATLANTA, GA 30338

NAME: GARY P. HICKMAN  OFFICER  DIRECTOR  
 TITLE: ASST SECRETARY  
 ADDRESS: 900 ASHWOOD PKWY, STE 600  
 CITY/ST/ZIP/CO: ATLANTA, GA 30338

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/ GARY P. HICKMAN

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

GARY P. HICKMAN, ASST SECRETARY

PRINTED NAME AND CORPORATE TITLE

11/6/2015

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.