

1.) CORPORATION NAME:

DUE DATE: **8/31/2015**

Roux Associates, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1832791**

**NATIONAL CORPORATE RESEARCH, LTD.
250 BROWNS HILL COURT
MIDLOTHIAN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	50,000
COMBNV	4,950,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 209 SHAFTER STREET
CITY/ST/ZIP: ISLANDIA, NY 11749

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: DOUGLAS J SWANSON TITLE: PRES/CEO ADDRESS: 209 SHAFTER ST CITY/ST/ZIP/CO: ISLANDIA, NY 11749	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NEIL RAM TITLE: EXECUTIVE VP ADDRESS: 12 GILL STREET CITY/ST/ZIP/CO: WOBURN, MA 01801	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVEN SADIKER TITLE: EXECUTIVE VP ADDRESS: 209 SHAFTER ST CITY/ST/ZIP/CO: ISLANDIA, NY 11749	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PAUL H ROUX TITLE: TREAS/CHAIRMAN ADDRESS: 209 SHAFTER ST CITY/ST/ZIP/CO: ISLANDIA, NY 11749	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARY MACY TITLE: CFO/DIRECTOR ADDRESS: 209 SHAFTER STREET CITY/ST/ZIP/CO: ISLANDIA, NY 11749	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL ROUX TITLE: SECRETARY ADDRESS: 209 SHAFTER STREET CITY/ST/ZIP/CO: ISLANDIA, NY 11749	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMY K POTTER DIRECTOR 209 SHAFTER ST ISLANDIA, NY 11749	<input 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/ MARY MACY	MARY MACY, CFO/DIRECTOR	7/15/2015	
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.			