

1.) CORPORATION NAME:

Cook & Boardman NC, Inc.

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1854431**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3916 WESTPOINT BLVD.

CITY/ST/ZIP: WINSTON-SALEM, NC 27103

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: CHARLES R. HUMMEL TITLE: PRESIDENT ADDRESS: 3916 WESTPOINT BLVD. CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27103</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JULIANNE MARLEY TITLE: VICE PRESIDENT ADDRESS: 201 S. TRYON STREET SUITE 850 CITY/ST/ZIP/CO: CHARLOTTE, NC 28202</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: CHRISTOPHER ROBINSON TITLE: VICE PRESIDENT ADDRESS: 3916 WESTPOINT BLVD. CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27103</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: TIMOTHY W. HENRY TITLE: CFO ADDRESS: 3916 WESTPOINT BLVD CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27103</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: RAYMOND K. BOARDMAN TITLE: DIRECTOR ADDRESS: 3916 WESTPOINT BLVD CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27103</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN F. KIRBY TITLE: DIRECTOR ADDRESS: 127 PUBLIC SQUARE SUITE 5100 CITY/ST/ZIP/CO: CLEVELAND, OH 44114</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	C. EDWARD PLEASANTS, JR. DIRECTOR 3916 WESTPOINT BLVD WINSTON-SALEM, NC 27103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joe White ASST SECRETARY 3916 Westpoint Blvd Winston-Salem, NC 27103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Pam Windley ASST SECRETARY 3916 Westpoint Blvd Winston-Salem, NC 27103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Michael A Kane DIRECTOR 9506 Heydon Hall Circle Charlotte, NC 28210	<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/ TIMOTHY W. HENRY	TIMOTHY W. HENRY, CFO	3/20/2014
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.