

1.) CORPORATION NAME:

Skidmore Sales & Distributing Co., Inc.

DUE DATE: **3/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1855248**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9889 CINCINNATI-DAYTON RD.

CITY/ST/ZIP: WEST CHESTER, OH 45069

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:	JAMES P. MCCARTHY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9889 CINCINNATI-DAYTON RD		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	JOHN A. BUECKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9889 CINCINATTI-DAYTON RD.		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	STEPHEN M. JACKSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9898 CINCINATTI-DAYTON RD.		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	DOUGLAS S. SKIDMORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	9889 CINCINNATI-DAYTON RD.		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	GERALD SKIDMORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	9889 CINCINNATI-DAYTON RD.		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		
NAME:	CHARLES G. SKIDMORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9889 CINCINNATI-DAYTON RD		
CITY/ST/ZIP/CO:	WEST CHESTER, OH 45069		

NAME: STEPANKA FREY TITLE: CFO ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ROBERT MARK MCLAUGHLIN TITLE: PRODUCT MANAGER ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH 45069	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: GARY FREYTAG TITLE: DIRECTOR ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH 45069	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ROGER JOHANNIGMAN TITLE: DIRECTOR ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH 45069	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: GARY STEIER TITLE: DIRECTOR ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH 45069	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: L. D. WILLIAMS TITLE: DIRECTOR ADDRESS: 9889 CINCINNATI-DAYTON RD CITY/ST/ZIP/CO: WEST CHESTER, OH 45069	<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/ STEPANKA FREY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEPANKA FREY, CFO PRINTED NAME AND CORPORATE TITLE	3/31/2015 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.		