

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214521672

1.) CORPORATION NAME:

Tranter, Inc.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1856956**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5400 INTERNATIONAL TRADE DRIVE

CITY/ST/ZIP: RICHMOND, VA 23231

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:	R. BLAKE SNIDER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5700 GRANITE PARK SUITE 200 PLANO, TX 75024		
CITY/ST/ZIP/CO:			
NAME:	FEROZE PATEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	5700 GRANITE PARK SUITE 200 PLANO, TX 75024		
CITY/ST/ZIP/CO:			
NAME:	CLAES SVENSSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	V.P,Sec, Treas		
ADDRESS:	5700 GRANITE PARK SUITE 200 PLANO, TX 75024		
CITY/ST/ZIP/CO:			
NAME:	Robert T Madison Jr.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASSIST. TREAS.		
ADDRESS:	5400 INTERNATIONAL TRADE DRIVE RICHMOND, VA 23231		
CITY/ST/ZIP/CO:			
NAME:	Scott Poenitzsch	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5700 Granite Park, Suite 200 Plano, TX 75024		
CITY/ST/ZIP/CO:			
NAME:	Lars Renstrom	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Rudeboksvagen 1 Lund SE22655, 22655, SE		
CITY/ST/ZIP/CO:			

NAME: Thomas Thuresson TITLE: DIRECTOR ADDRESS: Rudeboksvagen CITY/ST/ZIP/CO: Lund SE22655, 22655, SE	<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.

<u>/s/ Robert T Madison Jr.</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>Robert T Madison Jr., ASSIST. TREAS.</u> PRINTED NAME AND CORPORATE TITLE	<u>4/25/2014</u> DATE
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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.