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|--|---|-------|------------|--------|---------|
| 1.) CORPORATION NAME: AndersonBrecon Inc. | DUE DATE: 8/31/2013 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER, 16TH FLOOR 1111 EAST MAIN STREET RICHMOND, VA | SCC ID NO: F1906561 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY | 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 100,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 100,000 | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: IL | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4545 ASSEMBLY DRIVE

CITY/ST/ZIP: ROCKFORD, IL 61109

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.

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| NAME: WILLIAM T. MITCHELL TITLE: PRESIDENT ADDRESS: 3001 RED LION ROAD CITY/ST/ZIP/CO: PHILADELPHIA, PA 19114 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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|--|----------------------------------|--|--|
| NAME: NATHAN EVERY TITLE: DIRECTOR ADDRESS: 3001 RED LION ROAD CITY/ST/ZIP/CO: PHILADELPHIA, PA 19114 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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|--|----------------------------------|--|--|
| NAME: ALAN FRAZIER TITLE: DIRECTOR ADDRESS: 3001 RED LION ROAD CITY/ST/ZIP/CO: PHILADELPHIA, PA 19114 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
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|--|---|-----------------------------------|--|
| NAME: WILLIAM BOLDING TITLE: SECRETARY ADDRESS: 3001 RED LION ROAD CITY/ST/ZIP/CO: PHILADELPHIA, PA 19114 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
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| NAME: JOE WHITTERS TITLE: DIRECTOR ADDRESS: 3001 RED LION ROAD CITY/ST/ZIP/CO: PHILADELPHIA, PA 19114 | <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.

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|---|----------------------------------|-----------|
| /s/ WILLIAM T. MITCHELL | WILLIAM T. MITCHELL, | 9/12/2013 |
| 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.