

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214538608				
1.) CORPORATION NAME: Nelson Financial Services, Inc.		DUE DATE: 8/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: INCorp SERVICES INC 7288 HANOVER GREEN DR MECHANCSVILLE, VA		SCC ID NO: F1936816				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY		5.) STOCK INFORMATION <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED					
COMMON	1,000					
4.) STATE OR COUNTRY OF INCORPORATION: IL						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 3002 N Greenfield Dr CITY/ST/ZIP: Freeport, IL 61032						
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: MICHAEL NELSON TITLE: DIRECTOR ADDRESS: 3002 N GREENFIELD DR CITY/ST/ZIP/CO: FREEPORT, IL 61032	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: JULIE NELSON TITLE: DIRECTOR ADDRESS: 3002 N GREENFIELD DR CITY/ST/ZIP/CO: FREEPORT, IL 61032	<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/ MICHAEL NELSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL NELSON, DIRECTOR PRINTED NAME AND CORPORATE TITLE	8/6/2014 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.						