

1.) CORPORATION NAME:

WINDOW COVERINGS ASSOCIATION OF AMERICA, INC.

DUE DATE: **12/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**REGISTERED AGENTS INC
4445 CORPORATION LN STE 264
VIRGINIA BEACH, VA**

SCC ID NO: **F1983347**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MO

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. Box 731

CITY/ST/ZIP: Wake Forest, NC 27587

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:	STEVEN ANDIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE3, NC 27596		

NAME:	SANDY DRUM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE, NC 27596		

NAME:	RAMON HARDY JR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE, NC 27596		

NAME:	MARCIA KALINA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE, NC 27596		

NAME:	LINDA PRINCIPE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE, NC 27596		

NAME:	JOELLEN REINWART	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YOUNGSVILLE, NC 27596		

NAME:	SANDRA VANSICKLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 PLANTATION DR		
CITY/ST/ZIP/CO:	YONGSVILLE, NC 27596		

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/ LINDA PRINCIPE	LINDA PRINCIPE, DIRECTOR	10/23/2015
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.