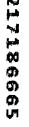


## 2017 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION



**AUTHORIZED** 

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1. CORPORATION NAME: MCWHORTER AND CO., INC.

DUE DATE: 12/31/17

SCC ID NO .: F059962-3

5. STOCK INFORMATION

CLASS

COMMON

- 2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ENTITY CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER, 16TH FLOOR 1111 EAST MAIN STREET RICHMOND, VA 23219
- 3. CITY OR COUNTY OF VA REGISTERED OFFICE: 216-RICHMOND CITY
- 4. STATE OR COUNTRY OF INCORPORATION: DE-DELAWARE

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

## 6. PRINCIPAL OFFICE ADDRESS:

Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: 10 EAST 4TH STREET	ADDRESS:
CITY/ST/ZIP ANNISTON, AL 36201	CITY/ST/ZIP

## 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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Mark appropriate box unless area below is blank:     Information is correct   Information is incorrect   Image: Correct Corre	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:
OFFICER 🛛 DIRECTOR 🕅 NAME: THOMAS P BROCK TITLE: PRESIDENT	OFFICER DIRECTOR D NAME: Krisy B. Smith TITLE: President / Treasurer ADDRESS: 12 Princeton Way
ADDRESS: 10 EAST 4TH STREET P.O. BOX 907 CITY/ST/ZIP: ANNISTON, AL 36202	address: 12 princeton Volly CITY/ST/ZIP: Annistan, AL 36207

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER

t is accurate and complete a	as of the date below.		
Krisy BSmith	President	12	z
PRINTED NAME AND CORPO	ORATE TITLE	D	ATE

It is a Class	1 misdemeanor for	any person to sign a do	cument that is false in	any material respect	with intent that the	document be delivered to
	• . • . • • · ·					

2017 ANNUAL REPORT CONTINUED 217186665		-1/3/2018 ല
CORPORATION NAME: MCWHORTER AND CO., INC.	DUE DATE: 12/31/17 SCC ID NO.: F059962-3	718666
7. DIRECTORS AND PRINCIPAL OFFICERS: (continued)	All directors and principal officers must be listed. An individual may be designated as both a director and an officer.	U.
Mark appropriate box unless area below is blank:	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:	
OFFICER 🖬 DIRECTOR 🗌	OFFICER 🕅 DIRECTOR 🕅	
NAME: PEGGY MURRAY	NAME: Deggy Murray	
TITLE: VP/CORP SEC	NAME: Peggy Murray TITLE: VP/CorpSec	
ADDRESS: 3020 WOODBRIDGE DRIVE	ADDRESS: 3620 Woodbrige Drive	
CITY/ST/ZIP: ANNISTON, AL 36207	CITY/ST/ZIP: Anniston, AL 36207	
Mark appropriate box unless area below is blank:	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:	
	OFFICER 🕅 DIRECTOR 🕅	
NAME: KRISY B SMITH	NAME: JEFF Mitchell	
TITLE: VICE PRESIDENT	TITLE Vice President	
ADDRESS: 12 PRINCETON WAY	ADDRESS: 7040 DId Huy 431	
CITY/ST/ZIP: ANNISTON, AL 36207	ADDRESS: 7040 DId Huy 431 CITY/ST/ZIP: Newell, XC 36280	
Mark appropriate box unless area below is blank:   Information is correct   Information is correct	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:	
NAME: Jeff Smith.	NAME:	
TITLE: CAREROLD AND A	TITLE:	0000840
ADDRESS: 12 Princeton Way	ADDRESS:	
NAME: Jeff Smith TITLE: Constant of Address: 12 Princeton Way CITY/ST/ZIP: Anniston, AL 36207	CITY/ST/ZIP:	
Mark appropriate box unless area below is blank:	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below:	
NAME:	NAME:	
TITLE:	TITLE:	
ADDRESS:	ADDRESS:	
CITY/ST/ZIP:	CITY/ST/ZIP:	