

Annual Report for fiscal year _____ (enter the CURRENT calendar year) for Corporations, Limited Partnerships, Voluntary Associations, and/or Business Trusts (per WV Code 59-1-2a) Beginning July 1, 2026, businesses that have filed annual reports on time for at least 5 years may be eligible to apply for biennial reporting. Please visit Onestop.wv.gov to complete your annual report filing and elect to file biennial reports going forward.

Important Note:

DO NOT provide any personal identifiable information on this form.

This form is a public document.

1) Name of the Organization: _____

2) Incorporation or Qualification Date: _____ In which State: _____

3) County: _____ County Code*: _____ Business Class Code*: _____

*If you do not know the code, you may leave the above sections blank.

4) Principal Office Address: Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip Code _____

5) Principal Mailing Address (if different from Principal Office): Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip Code _____

6) WV Designated Office Address (if applicable): Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip Code _____

7) Name and Mailing Address of person (agent) to whom notice of legal process may be sent, if any: Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip Code _____

***If new agent, furnish new agent's signature:** _____

8) Business E-mail Address where business correspondence may be sent:

9) Website address of the business, if any (ex: yourdomainname.com):

10) Total number of employees: _____

11) Total number of West Virginia resident employees: _____

12) Is this a minority owned business? Yes No Decline to Answer

13) Is this a woman owned business? Yes No Decline to Answer

14) Do you own or operate more than one business in West Virginia?

Yes No Decline to Answer

If "Yes"...

a. Number of businesses: _____

b. Number of West Virginia counties they operate in: _____

15) Veteran Employees and Veteran Owner Information:

a. Does your organization employ individuals who are United States Armed Forces veterans? Yes No Decline to Answer
*If "Yes", the total number of veterans it employs: _____

b. Is (Are) the owner(s) of the organization a United States Armed Forces veteran(s)? Yes No Decline to Answer

16) List names and addresses of the entity's parent company, if any. Also, list each entity's subsidiaries that are licensed to do business in WV. Please check whether each name is a Parent or a Subsidiary by checking the appropriate box next to the appropriate letter ("P" for Parent, "S" for Subsidiary) for each line. Attach additional sheet if necessary.

	Organization Name	Mailing Address
<input type="checkbox"/> P <input type="checkbox"/> S	_____	_____
<input type="checkbox"/> P <input type="checkbox"/> S	_____	_____

17) **REQUIRED** List the name and address of all members of the Board of Directors of the Corporation, Members of the Voluntary Association, General Partners of the LP, or Trustees of the Business Trust (attach additional page if necessary). Note: Non-profit Corporations must maintain 3 or more directors.

Name	Mailing Address	City	State	Zip Code
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

18) **REQUIRED** List the title, name, and address of all Officers (attach additional page if necessary)

Title	Name	Mailing Address	City	State	Zip Code
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

19) **REPORT MUST BE SIGNED** for the organization by an Officer of the entity.

Signature: _____ **Date:** _____

Capacity: _____ **Phone:** _____

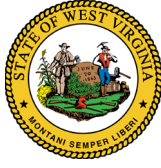
FILING FEE: If **paid by JUNE 30** deadline . . . \$25

If paid **after JUNE 30** deadline . . . \$75 (includes \$50 late fee)

MAKE CHECK, MONEY ORDER, OR CASHIER'S CHECK PAYABLE TO: West Virginia Secretary of State

MAIL COMPLETED REPORT AND PAYMENT TO ONE OF THE BUSINESS CENTERS BELOW:

<p>Charleston Office One-Stop Business Center 13 Kanawha Blvd. West Suite 201 Charleston, WV 25302 Phone: (304) 558-8000 Hours: Mon. - Fri. 8:30a - 5:00p EST</p>	<p>Clarksburg Office North Central WV Business Center 153 West Main Street Suite G- Third Floor Clarksburg, WV 26301 Phone: (304) 367-2775 Hours: Mon. -Fri. 9:00a - 5:00p EST</p>	<p>Martinsburg Office Eastern Panhandle Business Center 229 E. Martin Street Martinsburg, WV 25401 Phone: (304) 356-2654 Hours: Mon. - Fri. 9:00a - 5:00p EST</p>
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West Virginia Secretary of
 State Business & Licensing
 Division Tel: (304)558-8000
 Fax: (304)558-8381
 Website: www.wvsos.gov

CUSTOMER ORDER REQUEST

INCLUDE THIS FORM WITH YOUR FILING

Name of Business on Filing: _____

Contact for Filing:

Name: _____

Phone: _____

Email: _____

Order Description: Please Identify the type of filing or request being made.

EXPEDITING SERVICE OPTIONS*

- Standard (5-10 business days) - No additional cost
- In-Person Same Day -\$25 in addition to filing fee
- Next Business Day - \$25 in addition to filing fee
- 2 Hour - \$250 in addition to filing fee
- 1 Hour - \$500 in addition to filing fee

Expediting Service is NOT AVAILABLE for:

- Dissolutions / Withdrawals of Corporations, Voluntary Associations, or Business Trusts
- Credit Service Organization Registrations
- Trademark Filings
- Sole Proprietor / General Partnership Trade Names

*Fees apply to each business. Time frame Indicates when the filing will be completed and registered in the Secretary of State database.

Return Information:

Method of Return:

- Hold for Pick Up
- Email: _____
- Specialty Carrier (Please provide return envelope & prepaid label)
- USPS Mail (standard)

Attention: _____

Street: _____

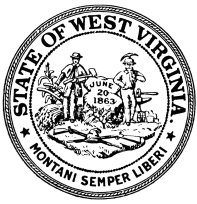
City: _____ State: _____ Zip code: _____

Please Mail Filing to Any Secretary of State Hub Office

WV One Stop Business Center
 13 Kanawha Blvd. W.
 Suite 201
 Charleston, WV 25302

North Central WV Business Hub
 153 West Main Street
 Suite G - Third Floor
 Clarksburg, WV 26301

Eastern Panhandle Business Hub
 229 East Martin Street
 Martinsburg, WV 25401



Secretary of State
Capitol Building Charleston,
WV 25305 Phone: (304)
558-6000 Website:
sos.wv.gov

Next Business Day, 2-Hour, and 1-Hour Expedite Service Guidelines

NEXT BUSINESS DAY EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most business organization filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. You must mark the document with your **"24-HOUR EXPEDITE"** request. If using a cover letter, note that you are requesting 24-hour expedited service, and include your telephone number and return information. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling is \$25.00 in addition to the usual fee for service. Please consult our fee schedules for the appropriate fee. If you require assistance, please contact this office.

Time Constraints: Under most circumstances, each filing submitted receives same day filing date and may be picked up in the office by the end of the same business day. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in acceptable fileable form.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$250.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgment (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.