

1.) CORPORATION NAME:

Farmers Bank, Windsor, Virginia

DUE DATE: **8/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
RICHARD J HOLLAND JR
50 E WINDSOR BLVD
PO BOX 285**

SCC ID NO: **00184044**

WINDSOR, VA 23487

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
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| COMMON | 10,000,000 |
| PREFER | 10,810 |
| PREFA | 8,752 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ISLE OF WIGHT COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 50 EAST WINDSOR BOULEVARD
PO BOX 285

CITY/ST/ZIP: WINDSOR, VA 23487-

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: | RICHARD J HOLLAND JR | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | P/CEO | | |
| ADDRESS: | PO BOX 285 | | |
| CITY/ST/ZIP/CO: | WINDSOR, VA 23487- | | |
| NAME: | PATRICIA T ALLEN | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SR VP | | |
| ADDRESS: | 50 EAST WINDSOR BLVD PO BOX 285 | | |
| CITY/ST/ZIP/CO: | WINDSOR, VA 23487- | | |
| NAME: | N F CARR JR | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SR VP | | |
| ADDRESS: | 50 E WINDSOR BLVD PO BOX 285 | | |
| CITY/ST/ZIP/CO: | WINDSOR, VA 23487- | | |
| NAME: | NORENE T PHILLIPS | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SR VP/CHF RETAI | | |
| ADDRESS: | 50 E WINDSOR BLVD PO BOX 285 | | |
| CITY/ST/ZIP/CO: | WINDSOR, VA 23487- | | |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | VERNON M TOWLER EXEC VP 50 E WINDSOR BLVD PO BOX 285 WINDSOR, VA 23487- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KATHY C. BRYANT SVP 50 E WINDSOR BLVD PO BOX 285 WINDSOR, VA 23487- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DAN R. ELLIS, JR. CFO, SVP 50 E WINDSOR BLVD P O BOX 285 WINDSOR, VA 23487- | <input checked="" type="checkbox"/> OFFICER | <input 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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| <u>/s/ DAN R. ELLIS, JR.</u> | <u>DAN R. ELLIS, JR., CFO, SVP</u> | <u>7/27/2011</u> |
| 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.