

1.) CORPORATION NAME:

**Farmers Bank, Windsor, Virginia**

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **00184044**

**WINDSOR, VA 23487**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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.

NAME:	RICHARD J HOLLAND JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO/Chairman		
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		
CITY/ST/ZIP/CO:	PO BOX 285 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		
CITY/ST/ZIP/CO:	PO BOX 285 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		
CITY/ST/ZIP/CO:	PO BOX 285 WINDSOR, VA 23487		

NAME:	VERNON M TOWLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	President		
ADDRESS:	50 E WINDSOR BLVD		
CITY/ST/ZIP/CO:	PO BOX 285 WINDSOR, VA 23487		

NAME:	KATHY C. BRYANT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	50 E WINDSOR BLVD		
CITY/ST/ZIP/CO:	PO BOX 285 WINDSOR, VA 23487		

NAME:	Kristy DeJarnette	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	50 E. Windsor Blvd		
CITY/ST/ZIP/CO:	P.O. Box 285 Windsor, VA 23487		

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/ Kristy DeJarnette	Kristy DeJarnette, CFO	6/14/2012
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.