

1.) CORPORATION NAME:

BEACON CREDIT UNION, INCORPORATED

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**GREG MCCONVILLE
6320 LOGANS LN
LYNCHBURG, VA**

SCC ID NO: **00463802**

5.) STOCK INFORMATION

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

LYNCHBURG CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 107 Leroy Bowen Drive

CITY/ST/ZIP: LYNCHBURG, VA 24502

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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|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | GREG W MCCONVILLE | |
| TITLE: | PRES/CEO | |
| ADDRESS: | 6320 LOGANS LANE | |
| CITY/ST/ZIP/CO: | LYNCHBURG, VA 24502 | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | NANCY COMPTON | |
| TITLE: | SECRETARY | |
| ADDRESS: | PO BOX 11 | |
| CITY/ST/ZIP/CO: | BEDFORD, VA 24523 | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | KELLY KURTZ | |
| TITLE: | COB | |
| ADDRESS: | 1267 SOUTH OAKLAWN DRIVE | |
| CITY/ST/ZIP/CO: | FOREST, VA 24551 | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | SANDRA WILLIAMS | |
| TITLE: | VICE CHAIRMAN | |
| ADDRESS: | 102 SALEM DRIVE | |
| CITY/ST/ZIP/CO: | FOREST, VA 24551 | |

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|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | LEVI MORRIS | |
| TITLE: | N/A | |
| ADDRESS: | 185 DANIELS DRIVE | |
| CITY/ST/ZIP/CO: | MADISON HGHTS, VA 24572 | |

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/ GREG W MCCONVILLE | GREG W MCCONVILLE, | 2/11/2014 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRES/CEO 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.