

1.) CORPORATION NAME:

HENSEL ECKMAN Y. M. C. A., INCORPORATED

DUE DATE: **1/16/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ALLISON HALLER HUNTER
615 OAKHURST
PULASKI, VA**

SCC ID NO: **00642272**

5.) STOCK INFORMATION

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

PULASKI COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 615 OAKHURST AVE

CITY/ST/ZIP: PULASKI, VA 24301

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:	JAMES DAVID ADKINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5283 Cougar Circle Road		
CITY/ST/ZIP/CO:	Dublin, VA 24084		
NAME:	DEBRA K. MAXWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1971 MEDALLION DRIVE		
CITY/ST/ZIP/CO:	PULASKI, VA 24301		
NAME:	JON FITZWATER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5067 SOUTHERN DR		
CITY/ST/ZIP/CO:	DUBLIN, VA 24084		
NAME:	DANIEL GRUBB	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3850 BAINBRIDGE DR		
CITY/ST/ZIP/CO:	PULASKI, VA 24301		
NAME:	FAYE HANKS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1413 ENGLISH FOREST RD		
CITY/ST/ZIP/CO:	PULASKI, VA 24301		
NAME:	ALLISON HUNTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5549 SKEWES LANE		
CITY/ST/ZIP/CO:	PULASKI, VA 24301		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SARA TERRY DIRECTOR JEFFERSON AVE PULASKI, VA 24301	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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/ ALLISON HUNTER	ALLISON HUNTER, DIRECTOR	1/16/2014	
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.			