

1.) CORPORATION NAME:

**NEW RIVER ELECTRICAL CORPORATION**

DUE DATE: **5/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ROBERT B ARRITT JR  
PO BOX 70  
CLOVERDALE, VA**

SCC ID NO: **00669846**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	750,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**BOTETOURT COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 15 Cloverdale Place

CITY/ST/ZIP: Cloverdale, VA 24077

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.

<p>NAME: THOMAS WOLDEN TITLE: PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: TERRY M GARRETT TITLE: VICE PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHNNY E LANNING TITLE: VICE PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY B LEONARD TITLE: VICE PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: BARRY S MURRAY TITLE: VICE PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN F NEY TITLE: VICE PRESIDENT ADDRESS: 15 CLOVERDALE PLACE CITY/ST/ZIP/CO: CLOVERDALE, VA 24077</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT B ARRITT JR VICE PRESIDENT 15 CLOVERDALE PLACE CLOVERDALE, VA 24077	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW I POE VICE PRESIDENT 15 CLOVERDALE PLACE CLOVERDALE, VA 24077	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER J WHITELY VICE PRESIDENT 15 CLOVERDALE PLACE CLOVERDALE, VA 24077	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT B ARRITT JR SECRETARY 15 CLOVERDALE PLACE CLOVERDALE, VA 24077	<input checked="" 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/ ROBERT B ARRITT JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROBERT B ARRITT JR, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	4/23/2015 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.			