

1.) CORPORATION NAME:

**THE KIWANIS CLUB OF CHRISTIANSBURG**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**D MICHAEL BARBER  
365 TOMAHAWK DR  
CHRISTIANSBURG, VA 24073**

SCC ID NO: **00702225**

5.) STOCK INFORMATION

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

**MONTGOMERY COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 313

CITY/ST/ZIP: CHRISTIANSBURG, VA 24068

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:	WOODY NESTER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1930 BRIDLE LANE		
CITY/ST/ZIP/CO:	RINER, VA 24149		
NAME:	D MICHAEL BARBER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	365 TOMAHAWK DRIVE		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	M. JOEL SUTPHIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2740 MADISON AVENUE		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	BRYAN RICE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1075 CASSANT LN		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	RICHARD BALLENGEE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	315 MAPLE DRIVE		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	JOHN WOOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1160 CAMBRIA ST		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		

NAME:	BOB LEWIT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1335 RED HAWK RUN		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	ROBERT HARRIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	230 REVOLUTION CIRCLE		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	KEN CRANFORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	70 GREENWAY DRIVE		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	DENNIS HUNTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	540 INDEPENDENCE BLVD		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	ARTHUR LANCASTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1465 REDHAWK RUN		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	TEDDY MCCRACKEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	90 NURSURY RD		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	GREGORY MOORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	506 SOUTH FRANKLIN ST		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	DEBORAH MOORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	506 SOUTH FRANKLIN ST		
CITY/ST/ZIP/CO:	CHRISTIANSBURG, VA 24073		
NAME:	JOEL CADWELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6436 BELSPRING RD		
CITY/ST/ZIP/CO:	RADFORD, VA 24141		

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.

<u>/s/ D MICHAEL BARBER</u>	<u>D MICHAEL BARBER,</u>	<u>10/17/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.