

1.) CORPORATION NAME:

**MT. CRAWFORD COMMUNITY CENTER, INC.**

DUE DATE: **6/30/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY  
MICHAEL BECKLER  
P.O. BOX 241  
MT. CRAWFORD, VA 22841**

SCC ID NO: **00780296**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ROCKINGHAM COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 241

CITY/ST/ZIP: MT CRAWFORD, VA 22841-

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: RACHEL NICOLE MITCHELL  
TITLE: SECRETARY  
ADDRESS: 3083 OAK RIDGE RD  
CITY/ST/ZIP/CO: MT CRAWFORD, VA 22841-

OFFICER

DIRECTOR

NAME: ROBERT EBERLY  
TITLE: DIRECTOR  
ADDRESS: 4762 W TIMBER RIDGE ROAD  
CITY/ST/ZIP/CO: MT CRAWFORD, VA 22841-

OFFICER

DIRECTOR

NAME: ALFRED COOK  
TITLE: PRESIDENT  
ADDRESS: P.O. BOX 164  
CITY/ST/ZIP/CO: MT. CRAWFORD, VA 22841-

OFFICER

DIRECTOR

NAME: CAITLIN DAVIS  
TITLE: VICE PRESIDENT  
ADDRESS: 6041 SCHOLARS ROAD  
CITY/ST/ZIP/CO: MT. CRAWFORD, VA 22841-

OFFICER

DIRECTOR

NAME: JASON LANDES  
TITLE: TREASURER  
ADDRESS: 8187 GREENHOUSE ROAD  
CITY/ST/ZIP/CO: WEYERS CAVE, VA 24486-

OFFICER

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.

<u>/s/ ALFRED COOK</u>	<u>ALFRED COOK, PRESIDENT</u>	<u>5/18/2011</u>
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.