

1.) CORPORATION NAME:

BRANCHVILLE COMMUNITY CENTER, INCORPORATED

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NANCY BARRETT
GENERAL DELIVERY
BRANCHVILLE, VA**

SCC ID NO: **00894139**

5.) STOCK INFORMATION

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

SOUTHAMPTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 45

CITY/ST/ZIP: BRANCHVILLE, VA 23828

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:	NANCY BARRETT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 45		
CITY/ST/ZIP/CO:	BRANCHVILLE, VA 23828		
NAME:	HARRELL TURNER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	14045 WALLER ROAD		
CITY/ST/ZIP/CO:	BRANCHVILLE, VA 23828		
NAME:	DIANNE UMPHLETT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	S/T		
ADDRESS:	PO BOX 112		
CITY/ST/ZIP/CO:	BRANCHVILLE, VA 23828		
NAME:	HORACE EDWARDS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 12		
CITY/ST/ZIP/CO:	BRANCHVILLE, VA 23828		
NAME:	GAIL MCPHERSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15313 WHITEHEAD RD		
CITY/ST/ZIP/CO:	BRANCHVILLE, VA 23828		
NAME:	GEORGE RAWLINGS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 478		
CITY/ST/ZIP/CO:	BOYKINS, VA 23827		

NAME: MARK TURNER TITLE: DIRECTOR ADDRESS: 31468 VICKS MILLPOND RD CITY/ST/ZIP/CO: BRANCHVILLE, VA 23828	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: W H UMPHLETT JR TITLE: DIRECTOR ADDRESS: PO BOX 112 CITY/ST/ZIP/CO: BRANCHVILLE, VA 23828	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DIANNE UMPHLETT	DIANNE UMPHLETT, S/T	1/10/2014
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.