

1.) CORPORATION NAME: <b>Council of Community Services</b>	DUE DATE: <b>1/2/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CAROLEE SARVER 502 CAMPBELL AVE ROANOKE, VA</b>	SCC ID NO: <b>01004738</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ROANOKE CITY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 502 CAMPBELL AVENUE, SW  
P.O. BOX 598

CITY/ST/ZIP: ROANOKE, VA 24004

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: DANIEL W MERENDA	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: PO BOX 598				
CITY/ST/ZIP/CO: ROANOKE, VA 24004				

NAME: HENRY SCHOLZ IV	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: CHAIRMAN				
ADDRESS: 213 S JEFFERSON ST STE 1007				
CITY/ST/ZIP/CO: ROANOKE, VA 24011				

NAME: SUSAN LANCASTER	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: PAST CHAIRMAN				
ADDRESS: 723 WHITE OAK ROAD SW				
CITY/ST/ZIP/CO: ROANOKE, VA 24014				

NAME: Paul Phillips	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: Vice Chairman				
ADDRESS: 5240 Valleypark Drive				
CITY/ST/ZIP/CO: Roanoke, VA 24019				

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/ DANIEL W MERENDA	DANIEL W MERENDA, PRESIDENT	1/2/2014
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.