

1.) CORPORATION NAME:

CLINCH VALLEY MEMORIAL CEMETERY, INC.

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **01424746**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	250

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 NORTH KANAWHA

CITY/ST/ZIP: BECKLEY, WV 25801

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: JAMES L ALIFF TITLE: PRESIDENT ADDRESS: 300 NORTH KANAWHA CITY/ST/ZIP/CO: BECKLEY, WV 25801</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: THOMAS M KITCHEN TITLE: VICE PRESIDENT ADDRESS: 1333 S CLEARVIEW PKWY CITY/ST/ZIP/CO: JEFFERSON, LA 70121</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL G. HYMEL TITLE: VICE PRESIDENT ADDRESS: 1333 S. CLEARVIEW PARKWAY CITY/ST/ZIP/CO: JEFFERSON, LA 70121</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: ANGELA M LACOUR TITLE: VICE PRESIDENT ADDRESS: 1333 S. CLEARVIEW PARKWAY CITY/ST/ZIP/CO: JEFFERSON, LA 70121</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: KENNETH G MYERS JR TITLE: EXECUTIVE VP ADDRESS: 1333 S CLEARVIEW PKWY CITY/ST/ZIP/CO: JEFFERSON, LA 70121</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: G. KENNETH STEPHENS, JR. TITLE: EXECUTIVE VP ADDRESS: 9220 RESTLAND ROAD CITY/ST/ZIP/CO: DALLAS, TX 75243</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: LEWIS J DERBES, JR TITLE: TREASURER ADDRESS: 1333 S CLEARVIEW PKWY CITY/ST/ZIP/CO: JEFFERSON, LA 70121	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BRENDA K GIBBS TITLE: ASST SECRETARY ADDRESS: 1333 S. CLEARVIEW PARKWAY CITY/ST/ZIP/CO: JEFFERSON, LA 70121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: LISA T. WINNINGKOFF TITLE: SECRETARY ADDRESS: 1333 S CLEARVIEW PKWY CITY/ST/ZIP/CO: JEFFERSON, LA 70121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MARTIN R DE LAUREAL TITLE: DIRECTOR ADDRESS: 1333 S. CLEARVIEW PARKWAY CITY/ST/ZIP/CO: JEFFERSON, LA 70121	<input 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/ LISA T. WINNINGKOFF SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LISA T. WINNINGKOFF, SECRETARY PRINTED NAME AND CORPORATE TITLE	12/10/2013 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.		