

1.) CORPORATION NAME:

SHENANDOAH AREA AGENCY ON AGING, INC.

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CYNTHIA V PALMER
207 MOSBY LANE
FRONT ROYAL, VA 22630**

SCC ID NO: **01604529**

5.) STOCK INFORMATION

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

WARREN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 207 MOSBY LANE

CITY/ST/ZIP: FRONT ROYAL, VA 22630

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:	CYNTHIA PALMER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	664 GERMANY RD.		
CITY/ST/ZIP/CO:	STEPHENS CITY, VA 22655		
NAME:	JOHN HUDSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	308 CHURCH ST.		
CITY/ST/ZIP/CO:	BERRYVILLE, VA 22611		
NAME:	JAMES BRINKMEIER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	109 ISAAC COURT		
CITY/ST/ZIP/CO:	BERRYVILLE, VA 22611		
NAME:	VIOLET CARTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STONEBURNER & CARTER 11 WATER ST.		
CITY/ST/ZIP/CO:	FRONT ROYAL, VA 22630		
NAME:	Travis CLARK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	791 STONYMAN RD.		
CITY/ST/ZIP/CO:	LURAY, VA 22835		
NAME:	GEORGE CLINE JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	86 MENELEE LANE		
CITY/ST/ZIP/CO:	FRONT ROYAL, VA 22630		

NAME: ROBERT KENDALL TITLE: DIRECTOR ADDRESS: 332 RIDGE AVE CITY/ST/ZIP/CO: WINCHESTER, VA 22601	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANTHONY ROPER TITLE: DIRECTOR ADDRESS: 100 N. CHURCH ST CITY/ST/ZIP/CO: BERRYVILLE, VA 22611	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WANDA SHOEMAKER TITLE: DIRECTOR ADDRESS: 36 PALMYRA CHURCH RD. CITY/ST/ZIP/CO: EDINBURG, VA 22824	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TERESA STROHMEYER TITLE: DIRECTOR ADDRESS: 1263 CEDAR RD. CITY/ST/ZIP/CO: CLEARBROOK, VA 22624	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHERYL SWARTZ TITLE: DIRECTOR ADDRESS: 122 COUNTRY CLUB CIRCLE CITY/ST/ZIP/CO: WINCHESTER, VA 22602	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John Woodward TITLE: DIRECTOR ADDRESS: 1066 Honeyville Road CITY/ST/ZIP/CO: Stanley, VA 22851	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Mari-Ane Fowler TITLE: DIRECTOR ADDRESS: 1 Front Royal Road CITY/ST/ZIP/CO: Strasburg, VA 22657	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Angela Whitacre TITLE: DIRECTOR ADDRESS: P.O Box 92 CITY/ST/ZIP/CO: Gore, VA 22637	<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/ CYNTHIA PALMER	CYNTHIA PALMER, PRESIDENT	8/13/2012
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.