

1.) CORPORATION NAME: <b>EASTERN SHORE RURAL HEALTH SYSTEM,          INCORPORATED</b>	DUE DATE: <b>3/31/2013</b>  SCC ID NO: <b>01651918</b>		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>NANCY J STERN          9434 HOSPITAL AVE          NASSAWADOX, VA 23413</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>NORTHAMPTON COUNTY</b>			
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>			

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: PO BOX 1039 9434 HOSPITAL AVE  CITY/ST/ZIP: NASSAWADOX, VA 23413	
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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: DENISE BLAND TITLE: PRESIDENT ADDRESS: PO BOX 1239 CITY/ST/ZIP/CO: EASTVILLE, VA 23347	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: DR JOHN SCHULZ TITLE: VICE PRESIDENT ADDRESS: 616 TAZEWELL AVENUE CITY/ST/ZIP/CO: CAPE CHARLES, VA 23310	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: CARAMINE KELLAM TITLE: SECRETARY ADDRESS: PO BOX 38 CITY/ST/ZIP/CO: FRANKTOWN, VA 23354	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: CALVIN BRICKHOUSE TITLE: DIRECTOR ADDRESS: 5561 BAYSIDE ROAD CITY/ST/ZIP/CO: EXMORE, VA 23350	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: Pete Duer TITLE: TREASURER ADDRESS: P.O. Box 195 CITY/ST/ZIP/CO: Quinby, VA 23423	<input checked="" type="checkbox"/> OFFICER	<input 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/ DENISE BLAND	DENISE BLAND, PRESIDENT	1/21/2013
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.