

1.) CORPORATION NAME: HOPKINS LUMBER CONTRACTORS, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JOHN W HOPKINS 680 OLD SAND ROAD RIDGEWAY, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRY COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 1/31/2016 SCC ID NO: 02026052 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> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 680 OLD SAND ROAD CITY/ST/ZIP: RIDGEWAY, VA 24148
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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: JOHN W HOPKINS JR TITLE: PRESIDENT ADDRESS: 680 OLD SAND ROAD CITY/ST/ZIP/CO: RIDGEWAY, VA 24148	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOHN W HOPKINS TITLE: VICE PRESIDENT ADDRESS: 680 OLD SAND ROAD CITY/ST/ZIP/CO: RIDGEWAY, VA 24148	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: SHELLEY C TURNER TITLE: S/T ADDRESS: 680 OLD SAND ROAD CITY/ST/ZIP/CO: RIDGEWAY, VA 24148	<input checked="" type="checkbox"/>	OFFICER	<input 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/ SHELLEY C TURNER	SHELLEY C TURNER, S/T	1/29/2016
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.