

1.) CORPORATION NAME:

CARILION CLINIC FOUNDATION

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

BRIGGS W ANDREWS

213 S JEFFERSON ST STE 720

PO BOX 40032

ROANOKE, VA 24022-32

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ROANOKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **12/31/2011**

SCC ID NO: **02249035**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 213 S JEFFERSON ST STE 720
PO BOX 40032

CITY/ST/ZIP: ROANOKE, VA 24022-0032

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: DONALD E. LORTON
TITLE: TREASURER
ADDRESS: 1141 WINDY HILL ROAD
CITY/ST/ZIP/CO: GOODVIEW, VA 24095-

OFFICER

DIRECTOR

NAME: BRIGGS W ANDREWS
TITLE: SECRETARY
ADDRESS: 3215 GRANDIN RD SW
CITY/ST/ZIP/CO: ROANOKE, VA 24018-

OFFICER

DIRECTOR

NAME: GEORGE B CARTLEDGE JR
TITLE: DIRECTOR
ADDRESS: 3101 SOMERSET ST SW
CITY/ST/ZIP/CO: ROANOKE, VA 24014-

OFFICER

DIRECTOR

NAME: WARNER DALHOUSE
TITLE: DIRECTOR
ADDRESS: 460 TRANQUILITY RD
CITY/ST/ZIP/CO: MONETA, VA 24121-

OFFICER

DIRECTOR

NAME: JAMES A HARTLEY
TITLE: DIRECTOR
ADDRESS: P O BOX 374
CITY/ST/ZIP/CO: PEARISBURG, VA 24134-

OFFICER

DIRECTOR

NAME: VERNICE LAW TITLE: DIRECTOR ADDRESS: 3345 KINGSBURY CIR SW CITY/ST/ZIP/CO: ROANOKE, VA 24014-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: SHIRLEY HOLLAND TITLE: DIRECTOR ADDRESS: 161 LILA LN CITY/ST/ZIP/CO: BOONES MILL, VA 24065-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MINNIS E RIDENOUR TITLE: DIRECTOR ADDRESS: VIRGINIA TECH 319 BURRUSS HALL (0183) CITY/ST/ZIP/CO: BLACKSBURG, VA 24061-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: NANCY HOWELL AGEE TITLE: PRESIDENT ADDRESS: 802 CHERRYWOOD RD CITY/ST/ZIP/CO: SALEM, VA 24153-	<input checked="" 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.		
<u>/s/ BRIGGS W ANDREWS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRIGGS W ANDREWS, <u>SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>10/26/2011</u> 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.		