

1.) CORPORATION NAME:

METROPOLITAN REPEATER ASSOCIATION, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
MADISON M LONG
1975 COVINGTON RD
PO BOX 235**

CROZIER, VA 23039

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

GOOCHLAND COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **6/30/2011**

SCC ID NO: **02308385**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 4978

CITY/ST/ZIP: GLEN ALLEN, VA 23058-

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:	LARRY K HALL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9244 CHATHAM GROVE LANE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23236-		
NAME:	HENRY HASSELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	PO BOX 805		
CITY/ST/ZIP/CO:	AMELIA, VA 23002-		
NAME:	MADISON M LONG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	PO BOX 235		
CITY/ST/ZIP/CO:	CROZIER, VA 23039-		
NAME:	ROBIN E GALLAGHER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9506 MARKLAWN DR		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229-3229		
NAME:	THOMAS FLIPPIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	13637 PRINCE WILLIAM DR		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23114-		

NAME: JON BENNETT TITLE: DIRECTOR ADDRESS: 12504 GAYTON STATION BLVD CITY/ST/ZIP/CO: RICHMOND, VA 23233-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: EDWIN BRYCE TITLE: DIRECTOR ADDRESS: 5209 NEW KENT RD CITY/ST/ZIP/CO: RICHMOND, VA 23225-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: RALPH FETTY TITLE: DIRECTOR ADDRESS: 4228 SHANNON HILL RD CITY/ST/ZIP/CO: COLUMBIA, VA 23080-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: RODNEY KIEPER TITLE: Trustee ADDRESS: 10232 KAYVEE RD CITY/ST/ZIP/CO: RICHMOND, VA 23235-	<input type="checkbox"/> OFFICER	<input checked="" 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.

<u>/s/ MADISON M LONG</u>	<u>MADISON M LONG, TREASURER</u>	<u>5/13/2011</u>
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.