

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212519160

1.) CORPORATION NAME:

HOFFMAN BEVERAGE COMPANY, INC.

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ROBIN D. RAY
5400 VIRGINIA BEACH BOULEVARD
VIRGINIA BEACH, VA 23462

SCC ID NO: **02422806**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	15,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5465 GREENWICH RD

CITY/ST/ZIP: VA BEACH, VA 23462

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.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	BRIAN S BURGESS				
TITLE:	PRESIDENT				
ADDRESS:	2429 BROAD BAY RD				
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23451				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	WALLACE K BALDWIN				
TITLE:	VICE PRESIDENT				
ADDRESS:	4409 IRONWOOD DRIVE				
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23462				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	ALLEN W PATRICK				
TITLE:	S/T				
ADDRESS:	5400 VIRGINIA BEACH BLVD				
CITY/ST/ZIP/CO:	VA BEACH, VA 23462				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	ROBIN D RAY				
TITLE:	CHMN BD				
ADDRESS:	5400 VIRGINIA BEACH BLVD				
CITY/ST/ZIP/CO:	VA BEACH, VA 23462				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	CATHERINE D STILES				
TITLE:	DIRECTOR				
ADDRESS:	10 EAST ORCHARD DR				
CITY/ST/ZIP/CO:	CHICKAMAUGA, GA 30707				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	KATHERINE HINES				
TITLE:	VICE CHAIRMAN				
ADDRESS:	1001 Ditchley Rd				
CITY/ST/ZIP/CO:	Virginia Beach, VA 23451				

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/ ROBIN D RAY	ROBIN D RAY, CHMN BD	5/22/2012
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.		