

1.) CORPORATION NAME:

HUMANE SOCIETY OF CAROLINE COUNTY, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

DIRECTOR

JANE G. HARDEE

11438 OAK HAVEN TRAIL

P. O. BOX 75

RUTHER GLEN, VA 22546

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CAROLINE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **11/30/2011**

SCC ID NO: **02790103**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11438 OAK HAVEN TRAIL
P O BOX 75

CITY/ST/ZIP: RUTHER GLEN, VA 22546-0075

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: NANCY CABANISS
TITLE: DIRECTOR
ADDRESS: 22518 TELEGRAPH ROAD
CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-

OFFICER

DIRECTOR

NAME: VICKY M GRIER
TITLE: DIRECTOR
ADDRESS: 67 CELTS WEST CV
CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-1009

OFFICER

DIRECTOR

NAME: SUSAN H HAFEY
TITLE: DIRECTOR
ADDRESS: 17484 CENTER DRIVE
CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-

OFFICER

DIRECTOR

NAME: MARK SVARE
TITLE: DIRECTOR
ADDRESS: 5526 RUDY LANE
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22407-

OFFICER

DIRECTOR

NAME: SANDRA M MILLS
TITLE: SECRETARY
ADDRESS: 11273 PINE RIDGE LANE
CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-

OFFICER

DIRECTOR

NAME: CLARENCE SCOTT MOSER TITLE: PRESIDENT ADDRESS: P O BOX 19 CITY/ST/ZIP/CO: LADYSMITH, VA 22501-0019	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JANE HARDEE TITLE: DIRECTOR ADDRESS: 11438 OAK HAVEN TRAIL CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: DARREN LYNCH TITLE: DIRECTOR ADDRESS: 8064 CEDAR FORK ROAD CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TERRIE LYNCH TITLE: DIRECTOR ADDRESS: 8064 CEDAR FORK ROAD CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CINDY FRANZEN TITLE: DIRECTOR ADDRESS: 551 REDGROUND DR CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KRYSTIN BANE TITLE: TREASURER ADDRESS: 541 REDGROUND DRIVE CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: WILLIAM RILEY TITLE: VICE PRESIDENT ADDRESS: 605 ABBEY DRIVE CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546-	<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/ JANE HARDEE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JANE HARDEE, DIRECTOR PRINTED NAME AND CORPORATE TITLE
11/28/2011 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.	