

1.) CORPORATION NAME:

HUMANE SOCIETY OF CAROLINE COUNTY, INC.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JANE G. HARDEE
11438 OAK HAVEN TRAIL
P. O. BOX 75**

SCC ID NO: **02790103**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RUTHER GLEN, VA 22546

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CAROLINE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

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:	CLARENCE SCOTT MOSER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	P O BOX 19		
CITY/ST/ZIP/CO:	LADYSMITH, VA 22501-0019		

NAME:	WILLIAM RILEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	605 ABBEY DRIVE		
CITY/ST/ZIP/CO:	RUTHER GLEN, VA 22546		

NAME:	SANDRA M MILLS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	11273 PINE RIDGE LANE		
CITY/ST/ZIP/CO:	RUTHER GLEN, VA 22546		

NAME:	KRYSTIN BANE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	541 REDGROUND DRIVE		
CITY/ST/ZIP/CO:	RUTHER GLEN, VA 22546		

NAME:	CINDY FRANZEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	551 REDGROUND DR		
CITY/ST/ZIP/CO:	RUTHER GLEN, VA 22546		

NAME:	VICKY M GRIER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	67 CELTS WEST CV		
CITY/ST/ZIP/CO:	RUTHER GLEN, VA 22546-1009		

NAME: SUSAN H HAFEY TITLE: DIRECTOR ADDRESS: 17484 CENTER DRIVE CITY/ST/ZIP/CO: RUTHER GLEN, VA 22546	<input type="checkbox"/> OFFICER	<input checked="" 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: MARK SVARE TITLE: DIRECTOR ADDRESS: 5526 RUDY LANE CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22407	<input 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.		
/s/ JANE HARDEE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JANE HARDEE, DIRECTOR PRINTED NAME AND CORPORATE TITLE	10/16/2012 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.		