

1.) CORPORATION NAME:

HCM/MTE Associates, Inc.

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CAROLYN K KYGER
100 MYERS DR
PO BOX 7823**

SCC ID NO: **02813103**

CHARLOTTESVILLE, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALBEMARLE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 7823

CITY/ST/ZIP: CHARLOTTESVILLE, VA 22906

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:	ELIZABETH M BORCHES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1521 OXFORD PLACE		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22903		

NAME:	WARREN POLSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR. VICE PRES.		
ADDRESS:	2703 HUNTINGTON ROAD		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22901		

NAME:	THOMAS J SOJKA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, SERVICE		
ADDRESS:	8390 DICK WOODS ROAD		
CITY/ST/ZIP/CO:	AFTON, VA 22920		

NAME:	DIANE LAWSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	P.O. BOX 121		
CITY/ST/ZIP/CO:	QUINQUE, VA 22965		

NAME:	H CARTER MYERS III	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	440 ROOKWOOD ROAD		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22901		

NAME:	JOAN GOEBEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	14705 ACORN RIDGE PLACE		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23112		

NAME:	CAROLYN K KYGER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	800 FIFTH STREET		
CITY/ST/ZIP/CO:	SHENANDOAH, VA 22849		

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/ CAROLYN K KYGER	CAROLYN K KYGER, SECRETARY	1/4/2014
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.