

1.) CORPORATION NAME:

BENCHMARK BANKSHARES, INC.

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ROBERT E. HAWTHORNE
110 S. BROAD STREET
P.O. BOX 603**

SCC ID NO: **02833895**

KENBRIDGE, VA

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 4,000,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LUNENBURG COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 100 S BROAD ST
PO BOX 569

CITY/ST/ZIP: KENBRIDGE, VA 23944

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: | MICHAEL O WALKER | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | PO BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | | |
|-----------------|---------------------|---|-----------------------------------|
| NAME: | E. NEIL BURKE | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | PO BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | | |
|-----------------|---------------------|---|-----------------------------------|
| NAME: | JAY A STAFFORD | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | ASST SECRETARY | | |
| ADDRESS: | PO BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | ERNEST R. LAIL | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CHAIRMAN | | |
| ADDRESS: | P. O. BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | CALVIN S. SPENCER | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | P. O. BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | DAVID K. BIGGS | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | P. O. BOX 569 | | |
| CITY/ST/ZIP/CO: | KENBRIDGE, VA 23944 | | |

| | | |
|--|--|--|
| NAME: MARK F. BRAGG TITLE: SECRETARY ADDRESS: P. O. BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: EARL H. CARTER, JR. TITLE: DIRECTOR ADDRESS: P. O. BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MARY JANE ELKINS TITLE: VICE CHAIRMAN ADDRESS: PO BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: CHARLES F. SIMMONS TITLE: DIRECTOR ADDRESS: P. O. BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MARK D. SOUTHALL TITLE: DIRECTOR ADDRESS: P. O. BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ELIZABETH M WINN TITLE: DIRECTOR ADDRESS: P. O. BOX 569 CITY/ST/ZIP/CO: KENBRIDGE, VA 23944 | <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/ E. NEIL BURKE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | E. NEIL BURKE, TREASURER PRINTED NAME AND CORPORATE TITLE | 3/26/2014 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. | | |