

1.) CORPORATION NAME:

**Boone Homes, Inc.**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DAVID E PERRY  
317 WASHINGTON AVENUE  
ROANOKE, VA**

SCC ID NO: **03152030**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMMON | 5,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ROANOKE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 129 BROAD STREET ROAD

CITY/ST/ZIP: MANAKIN-SABOT, VA 23103

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 type="checkbox"/> DIRECTOR |
| NAME:           | DAVID L OWEN                                |                                   |
| TITLE:          | PRESIDENT                                   |                                   |
| ADDRESS:        | 129 BROAD STREET ROAD                       |                                   |
| CITY/ST/ZIP/CO: | MANAKIN SABOT, VA 23103                     |                                   |

|                 |   |  |
|-----------------|---|--|
|                 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | J ALEXANDER BOONE                           |  |
| TITLE:          | VP/S/T                                      |  |
| ADDRESS:        | 3922 ELECTRIC ROAD SW                       |  |
| CITY/ST/ZIP/CO: | ROANOKE, VA 24018                           |  |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | M. EDWARD CUTCHINSII                        |                                   |
| TITLE:          | VICE PRESIDENT                              |                                   |
| ADDRESS:        | 129 BROAD STREET ROAD                       |                                   |
| CITY/ST/ZIP/CO: | MANAKIN SABOT, VA 23103                     |                                   |

|                 |   |  |
|-----------------|---|--|
|                 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | GEORGE L BOONE                              |  |
| TITLE:          | CHIEF EXEC OFFI                             |  |
| ADDRESS:        | 3922 ELECTRIC RD SW                         |  |
| CITY/ST/ZIP/CO: | ROANOKE, VA 24018                           |  |

|                 |                                  |  |
|-----------------|----------------------------------|--|
|                 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:           | JO ANNE B BOONE                  |  |
| TITLE:          | DIRECTOR                         |  |
| ADDRESS:        | 3922 ELECTRIC RD SW              |  |
| CITY/ST/ZIP/CO: | ROANOKE, VA 24018                |  |

|                 |   |                                   |
|-----------------|---|-----------------------------------|
|                 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME:           | Timothy B. Parent                           |                                   |
| TITLE:          | Executive VP                                |                                   |
| ADDRESS:        | 129 Broad Street Road                       |                                   |
| CITY/ST/ZIP/CO: | Manakin-Sabot, VA 23013                     |                                   |

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/ J ALEXANDER BOONE  | J ALEXANDER BOONE, VP/S/T        | 2/17/2014 |
| 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. |                                  |           |