

1.) CORPORATION NAME:

**TRI-RIVER HABITAT FOR HUMANITY, INC.**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**TRACY QUACKENBUSH  
45 N MAIN ST  
PO BOX 1219**

SCC ID NO: **03448164**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**HALIFAX, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HALIFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 824

CITY/ST/ZIP: HALIFAX, VA 24558

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 E KOCH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2011 SALISHAN DRIVE		
CITY/ST/ZIP/CO:	HALIFAX, VA 24558		
NAME:	DOROTHY DAY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	4171 BILL TUCK HWY		
CITY/ST/ZIP/CO:	SOUTH BOSTON, VA 24592		
NAME:	SANDRA GARNER COLEMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2181 WILSON MEMORIAL TRAIL		
CITY/ST/ZIP/CO:	VERNON HILL, VA 24597		
NAME:	ROBERT B HUGHES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1209 NORTH MAIN ST		
CITY/ST/ZIP/CO:	SOUTH BOSTON, VA 24592		
NAME:	ROBERT E BATES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	401 ALTA LANE		
CITY/ST/ZIP/CO:	SOUTH BOSTON, VA 24592		
NAME:	TAMMY S POOL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COMPLIANCE OFF		
ADDRESS:	2174 ALPHONSE DAIRY ROAD		
CITY/ST/ZIP/CO:	SOUTH BOSTON, VA 24592		

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/ MICHAEL E KOCH	MICHAEL E KOCH, PRESIDENT	7/14/2013
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.		