

1.) CORPORATION NAME: RADFORD BAND BOOSTERS, INC.	DUE DATE: 6/30/2015
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TRINA MURPHY 7708 CEDAR GROVE LANE RADFORD, VA	SCC ID NO: 03943180
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RADFORD CITY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 50 DALTON DR
C/O RADFORD HIGH SCHOOL

CITY/ST/ZIP: RADFORD, VA 24141

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: TIM CHANNELL	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 400 VALLEY FIELDS LANE				
CITY/ST/ZIP/CO: RADFORD, VA 24141				

NAME: CARRIE OWENS	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: VICE PRESIDENT				
ADDRESS: 668 BRADLEY ROAD				
CITY/ST/ZIP/CO: RADFORD, VA 24141				

NAME: TRINA MURPHY	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: TREASURER				
ADDRESS: 7708 CEDAR GROVE LANE				
CITY/ST/ZIP/CO: RADFORD, VA 24141				

NAME: VIRGINIA FOSTER	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 318 SIXTH AVENUE				
CITY/ST/ZIP/CO: RADFORD, VA 24141				

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/ TRINA MURPHY	TRINA MURPHY, TREASURER	4/21/2015
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.