

1.) CORPORATION NAME:

DUE DATE: **8/31/2016**

Middleburg Trust Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **04133419**

**RENA O WYNNE
1600 FOREST AVENUE
RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1600 Forest Avenue

CITY/ST/ZIP: RICHMOND, VA 23220

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: JOHN MASON LEE ANTRIM TITLE: P/CEO ADDRESS: 821 EAST MAIN STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GARY D LECLAIR ESQ TITLE: DIRECTOR ADDRESS: 951 E BYRD ST 8TH FLOOR CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RUSSELL L RABB JR TITLE: DIRECTOR ADDRESS: 6 CHARNWOOD ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23229	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM E TEALE TITLE: DIRECTOR ADDRESS: 119 HOLLINWELL CITY/ST/ZIP/CO: WILLIAMSBURG, VA 23188	<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/ JOHN MASON LEE ANTRIM	JOHN MASON LEE ANTRIM,	6/21/2016
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	P/CEO 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.