

1.) CORPORATION NAME:

SIGNATURE FINANCIAL MANAGEMENT, INC.

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ANNE B SHUMADINE
101 W MAIN ST STE 700
NORFOLK, VA**

SCC ID NO: **04291571**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	10,000
COMBNV	90,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
NORFOLK CITY

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 101 WEST MAIN ST
STE 700

CITY/ST/ZIP: NORFOLK, VA 23510

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:	GEORGE RANDOLPH WEBB, JR.	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	351 MIDDLE ST.		
CITY/ST/ZIP/CO:	PORTSMOUTH, VA 23704		
NAME:	SUSAN R COLPITTS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/S/T		
ADDRESS:	216 E. 39TH ST.		
CITY/ST/ZIP/CO:	NORFOLK, VA 23504		
NAME:	CARTER B.S. FURR, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1521 BLANFORD CIRCLE		
CITY/ST/ZIP/CO:	NORFOLK, VA 23505		
NAME:	AMANDA B GIFT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	928 UPPER HASTINGS WAY		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23452		
NAME:	WEYMAN GONG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1430 S VEAUX LOOP		
CITY/ST/ZIP/CO:	NORFOLK, VA 23509		
NAME:	ANNE B SHUMADINE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	7401 GLENCOVE PLACE		
CITY/ST/ZIP/CO:	NORFOLK, VA 23505		

NAME: DONNA S RUCKER TITLE: COMPLIANCE OFF. ADDRESS: 1253 E. BAY SHORE DRIVE CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23451	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JAMES H SHUMADINE TITLE: DIRECTOR ADDRESS: 7406 GLENCOVE PLACE CITY/ST/ZIP/CO: NORFOLK, VA 23505	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: STEPHEN P SMILEY TITLE: DIRECTOR ADDRESS: 6010 GLENDORA AVE. CITY/ST/ZIP/CO: DALLAS, TX 75230	<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/ GEORGE RANDOLPH WEBB, JR.	GEORGE RANDOLPH WEBB, JR., PRES/CEO	5/16/2014
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.		