

1.) CORPORATION NAME:

Crater Community Hospice, Inc.

DUE DATE: **12/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
BRENDA D MITCHELL
3916 S CRATER RD
PETERSBURG, VA 23805**

SCC ID NO: **04379269**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

PETERSBURG CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3916 S CRATER RD

CITY/ST/ZIP: PETERSBURG, VA 23805-

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: WILLIAM N. MILLER
TITLE: PRESIDENT
ADDRESS: 23 SESAME STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23235-

OFFICER

DIRECTOR

NAME: BRENDA D. MITCHELL
TITLE: ASST SECRETARY
ADDRESS: 11915 COLCHESTER LANE
CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113-

OFFICER

DIRECTOR

NAME: A. CHRISTINE SOVINE
TITLE: VICE PRESIDENT
ADDRESS: 36 BOONE TRAIL
CITY/ST/ZIP/CO: CARTERSVILLE, VA 23027-

OFFICER

DIRECTOR

NAME: M. STEPHEN CATES
TITLE: Treasurer
ADDRESS: 16930 TEMPLETON ROAD
CITY/ST/ZIP/CO: DISPUTANTA, VA 23842-

OFFICER

DIRECTOR

NAME: JONATHAN M. YOUNG
TITLE: SECRETARY
ADDRESS: VIRGINIA STATE UNIVERSITY
PO BOX 9398
CITY/ST/ZIP/CO: PETERSBURG, VA 23806-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOWARD D. BROWN, JR. DIRECTOR 1109 HYDE LANE RICHMOND, VA 23229-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREA C. ARTHUR DIRECTOR 3913 DARCY LANE CHESTERFIELD, VA 23832-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	E. JANE ELLIOTT DIRECTOR 206 STRATFORD DRIVE COLONIAL HEIGHTS, VA 23834-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN HAYES DIRECTOR PO BOX 980304 RICHMOND, VA 23235-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANICE JOHNSON DIRECTOR 3706 COLONADE DRIVE COLONIAL HEIGHTS, VA 23834-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RUSSELL E. WHITAKER, JR. DIRECTOR 11301 JOHNSON ROAD PETERSBURG, VA 23805-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ <u>BRENDA D. MITCHELL</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>BRENDA D. MITCHELL, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>12/7/2011</u> DATE
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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.