

1.) CORPORATION NAME:

NORTHEAST LAND AND INVESTMENT COMPANY

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

JACOB A. LUTZ, III

TROUTMAN SANDERS LLP, 15TH FLOOR

1001 HAXALL POINT

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **3/31/2011**

SCC ID NO: **04431870**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O VIRGINIA COMMERCE BANK
5350 LEE HIGHWAY

CITY/ST/ZIP: ARLINGTON, VA 22207-

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: PETER A CONVERSE
TITLE: PRESIDENT & CEO
ADDRESS: C/O VIRGINIA COMMERCE BANK
5350 LEE HIGHWAY
CITY/ST/ZIP/CO: ARLINGTON, VA 22207-

OFFICER

DIRECTOR

NAME: DENNIS M COOMBE
TITLE: VICE PRESIDENT
ADDRESS: C/O VIRGINIA COMMERCE BANK
5350 LEE HIGHWAY
CITY/ST/ZIP/CO: ARLINGTON, VA 22207-

OFFICER

DIRECTOR

NAME: JAMES R NALLS
TITLE: VICE PRESIDENT
ADDRESS: C/O VIRGINIA COMMERCE BANK
5350 LEE HIGHWAY
CITY/ST/ZIP/CO: ARLINGTON, VA 22207-

OFFICER

DIRECTOR

NAME: RICHARD B ANDERSON, JR.
TITLE: SECRETARY
ADDRESS: C/O VIRGINIA COMMERCE BANK
5350 LEE HIGHWAY
CITY/ST/ZIP/CO: ARLINGTON, VA 22207-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JENNIFER E MANNING TREASURER C/O VIRGINIA COMMERCE BANK 5350 LEE HIGHWAY ARLINGTON, VA 22207-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEONARD ADLER DIRECTOR C/O VIRGINIA COMMERCE BANK 5350 LEE HIGHWAY ARLINGTON, VA 22207-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH R LEHMAN DIRECTOR C/O VIRGINIA COMMERCE BANK 5350 LEE HIGHWAY ARLINGTON, VA 22207-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NORRIS E MITCHELL DIRECTOR C/O VIRGINIA COMMERCE BANK 5350 LEE HIGHWAY ARLINGTON, VA 22207-	<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/ PETER A CONVERSE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PETER A CONVERSE, PRESIDENT & CEO PRINTED NAME AND CORPORATE TITLE	7/7/2011 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.