

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	213515414
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1.) CORPORATION NAME: <b>ALVION PROPERTIES, INC.</b>	DUE DATE: <b>3/31/2013</b>		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>VIRGINIA PROFESSIONAL SERVICES LLC</b> <b>3850 Gaskins Rd., Suite 120</b> <b>Richmond, VA</b>	SCC ID NO: <b>04433157</b>		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>			

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 22 SOUTH MAIN STREET SUITE 2  CITY/ST/ZIP: HARRISBURG, IL 62946	
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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.
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NAME: SHIRLEY K. MEDLEY TITLE: PRESIDENT ADDRESS: 22 SOUTH MAIN STREET SUITE 2 CITY/ST/ZIP/CO: HARRISBURG, IL 62946	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: HAROLD M. REYNOLDS TITLE: SECRETARY ADDRESS: P.O. BOX 668 CITY/ST/ZIP/CO: DUNLAP, TN 37327	<input checked="" 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/ HAROLD M. REYNOLDS	HAROLD M. REYNOLDS,	3/28/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.