

1.) CORPORATION NAME:

DUE DATE: **5/31/2013**

IN MEDIAS RES

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **04469110**

**THOMAS W GILLIAM JR
ONE VILLAGE GREEN CIRCLE
CHARLOTTESVILLE, VA**

5.) STOCK INFORMATION

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

ALBEMARLE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3 UNIVERSITY CIRCLE

CITY/ST/ZIP: CHARLOTTESVILLE, VA 22903

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: JAMES DAVISON HUNTER
TITLE: DIRECTOR
ADDRESS: 822 GILLIAMS MOUNTAIN RD
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903

OFFICER DIRECTOR

NAME: THOMAS W GILLIAM JR
TITLE: SEC/TREAS
ADDRESS: 206 ROWLEDGE ROAD
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903

OFFICER DIRECTOR

NAME: BARBARA BRYANT
TITLE: DIRECTOR
ADDRESS: 204 N CENTRAL AVENUE
CITY/ST/ZIP/CO: ST LOUIS, MO 63105

OFFICER DIRECTOR

NAME: KEN ELZINGA
TITLE: DIRECTOR
ADDRESS: 246 ROOKWOOD DRIVE
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903

OFFICER DIRECTOR

NAME: DAVID TURNER
TITLE: PRESIDENT
ADDRESS: 500 LOBLOLLY LANE
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903

OFFICER DIRECTOR

NAME: Donald Flow
TITLE: CHAIRMAN
ADDRESS: 224 Roslyn Road
CITY/ST/ZIP/CO: Winston-Salem, NC 27104

OFFICER DIRECTOR

NAME: Richard Gilliam TITLE: DIRECTOR ADDRESS: Cumberland Resources PO Box 820 CITY/ST/ZIP/CO: Keswick, VA 22947	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Demi Lloyd Kiersznowski TITLE: DIRECTOR ADDRESS: 6538 Wenonga Road CITY/ST/ZIP/CO: Mission Hills, KS 66208	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Andrew Krouse TITLE: DIRECTOR ADDRESS: 3311 Turnberry Circle CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22911	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: John Moon TITLE: DIRECTOR ADDRESS: Morgan Stanley 1585 Broadway, Floor 39 CITY/ST/ZIP/CO: New York, NY 10036	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Jim Seneff TITLE: DIRECTOR ADDRESS: CNL Financial Group, Inc. PO Box 4920 CITY/ST/ZIP/CO: Orlando, FL 32802	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: John Weiser TITLE: DIRECTOR ADDRESS: 353 Bloomfield Road CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903	<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/ THOMAS W GILLIAM JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	THOMAS W GILLIAM JR, SEC/TREAS PRINTED NAME AND CORPORATE TITLE
5/1/2013 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.	