

1.) CORPORATION NAME: **The Harvest Foundation of the Piedmont** DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **E. LARRY RYDER** SCC ID NO: **04765533**

**1 ELLSWORTH STREET
MARTINSVILLE, VA**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 ELLSWORTH STREET
PO BOX 5183

CITY/ST/ZIP: MARTINSVILLE, VA 24115

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	W CHRISTOPHER BEELER JR	
TITLE:	VICE CHAIRMAN	
ADDRESS:	953 MULBERRY ROAD	
CITY/ST/ZIP/CO:	MARTINSVILLE, VA 24112	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GRACIE AGNEW	
TITLE:	SECRETARY	
ADDRESS:	532 JOHN BAKER ROAD	
CITY/ST/ZIP/CO:	FIELDALE, VA 24089	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES MCCLAIN II	
TITLE:	CHAIRMAN	
ADDRESS:	208 LESTER ST	
CITY/ST/ZIP/CO:	MARTINSVILLE, VA 24112	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	E LARRY RYDER	
TITLE:	DIRECTOR	
ADDRESS:	1101 OLD LIBERTY DRIVE	
CITY/ST/ZIP/CO:	AXTON, VA 24054	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	LEANNA BLEVINS	
TITLE:	DIRECTOR	
ADDRESS:	1014 SHERATON COURT	
CITY/ST/ZIP/CO:	MARTINSVILLE, VA 24112	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PAUL R EASON	
TITLE:	DIRECTOR	
ADDRESS:	89 LEATHERWOOD CIRCLE	
CITY/ST/ZIP/CO:	MARTINSVILLE, VA 24112	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VIRGINIA W HAMLET DIRECTOR 405 RIVERSIDE DRIVE BASSETT, VA 24055	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CYNTHIA INGRAM DIRECTOR 1163 YORKSHIRE ROAD MARTINSVILLE, VA 24112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMY P LAMPE DIRECTOR 460 PLANTATION ROAD MARTINSVILLE, VA 24112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EUGENE MADONIA TREASURER 234 JEFFERSON DAVIS DRIVE MARTINSVILLE, VA 24112	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTHA W MEDLEY DIRECTOR 1004 CHEROKEE TRAIL MARTINSVILLE, VA 24112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES MUEHLECK DIRECTOR 20 SEDGEFIELD HUNT DRIVE MARTINSVILLE, VA 24112	<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/ W CHRISTOPHER BEELER JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	W CHRISTOPHER BEELER JR, VICE CHAIRMAN PRINTED NAME AND CORPORATE TITLE	12/20/2013 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.			