

1.) CORPORATION NAME:  
**THE TROUT RUN PROPERTY OWNERS' ASSOCIATION,  
INC.**

DUE DATE: **12/31/2010**

SCC ID NO: **04769873**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  
**OFFICER  
ANITA MORRIS  
635 RIVER WALK TRAIL  
PO BOX 94**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**WOOLWINE, VA 24185**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**PATRICK COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 94

CITY/ST/ZIP: WOOLWINE, VA 24185-

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: JEFF BAIR  
TITLE: CO-PRESIDENT  
ADDRESS: PO BOX 94  
CITY/ST/ZIP/CO: WOOLWINE, VA 24185-

OFFICER

DIRECTOR

NAME: ANITA R MORRIS  
TITLE: CO-PRESIDENT  
ADDRESS: PO BOX 94  
CITY/ST/ZIP/CO: WOOLWINE, VA 24185-

OFFICER

DIRECTOR

NAME: JAMES WILLIAMS  
TITLE: VICE PRESIDENT  
ADDRESS: PO BOX 94  
CITY/ST/ZIP/CO: WOOLWINE, VA 24185-

OFFICER

DIRECTOR

NAME: JEAN HICKS  
TITLE: SECRETARY  
ADDRESS: PO BOX 94  
CITY/ST/ZIP/CO: WOOLWINE, VA 24185-

OFFICER

DIRECTOR

NAME: CARL HEIN  
TITLE: TREASURER  
ADDRESS: PO BOX 94  
CITY/ST/ZIP/CO: WOOLWINE, VA 24185-

OFFICER

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.

<u>/s/ ANITA R MORRIS</u>	<u>ANITA R MORRIS, CO-PRESIDENT</u>	<u>9/12/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.