

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214528336

1.) CORPORATION NAME:

Disabilities Resource Network, Inc.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DOROTHY NARODNY
3115 MONETA RD
BEDFORD, VA**

SCC ID NO: **04840864**

5.) STOCK INFORMATION

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

BEDFORD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 608

CITY/ST/ZIP: BEDFORD, VA 24523

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: JANET JOHNSON
 TITLE: VICE CHRPRSN/S
 ADDRESS: PO BOX 608
 CITY/ST/ZIP/CO: BEDFORD, VA 24523

OFFICER

DIRECTOR

NAME: DOROTHY NARODNY
 TITLE: CHAIRPERSON
 ADDRESS: PO BOX 608
 CITY/ST/ZIP/CO: BEDFORD, VA 24523

OFFICER

DIRECTOR

NAME: Travis Lynn Akins
 TITLE: DIRECTOR
 ADDRESS: 10360 OLD SHILLING RD.
 CITY/ST/ZIP/CO: Bent Mountain, VA 24059

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.

/s/ DOROTHY NARODNY
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

DOROTHY NARODNY,
CHAIRPERSON
PRINTED NAME AND CORPORATE
TITLE

5/31/2014
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.