

1.) CORPORATION NAME:

BLUE RIDGE SHETLAND SHEEPDOG CLUB, INC.

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**GERALDINE A MERCER
45419 PERSIMMON LN
STERLING, VA**

SCC ID NO: **04855664**

5.) STOCK INFORMATION

| | |
|-------|------------|
| CLASS | AUTHORIZED |
|-------|------------|

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 45419 PERSIMMON LANE

CITY/ST/ZIP: STERLING, VA 20165-2555

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: | ALLISON VOLPERT | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 11330 WAPLES MILL ROAD | | |
| CITY/ST/ZIP/CO: | OAKTON, VA 22124 | | |
| NAME: | CINDY GAINES | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 1989 PALMER ROAD | | |
| CITY/ST/ZIP/CO: | HEDGESVILLE, WI 25427 | | |
| NAME: | PAT SCHAAP | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 13019 TRIADELPHIA MILL RD. | | |
| CITY/ST/ZIP/CO: | CLARKSVILLE, MD 21029 | | |
| NAME: | ANN SILVERMAN | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 13537 GOOD INTENT ROAD | | |
| CITY/ST/ZIP/CO: | UNION BRIDGE, MD 21791 | | |
| NAME: | LYN KRIVANEK | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 40371 FOXFIELD LANE | | |
| CITY/ST/ZIP/CO: | LEESBURG, VA 20175 | | |
| NAME: | GERI MERCER | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 45419 PERSIMMON LANE | | |
| CITY/ST/ZIP/CO: | STERLING, VA 20165 | | |

| | | | |
|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | CAROLINE SULLIVAN DIRECTOR 4302 FRANKLIN STREET KENSINGTON, MD 20895 | <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/ ANN SILVERMAN | ANN SILVERMAN, TREASURER | 7/2/2014 | |
| 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. | | | |