

1.) CORPORATION NAME:

**VILLAGE BANK**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C HARRIL WHITEHURST JR  
15521 MIDLOTHIAN TURNPIKE, SUITE 200  
P.O. BOX 330**

SCC ID NO: **05027115**

**MIDLOTHIAN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESTERFIELD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 15521 MIDLOTHIAN TURNPIKE\_\_SUITE 100  
PO BOX 330

CITY/ST/ZIP: MIDLOTHIAN, VA 23113

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:	THOMAS W WINFREE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15521 Midlothian Turnpike, Suite 200		
CITY/ST/ZIP/CO:	P.O. Box 330 MIDLOTHIAN, VA 23113		

NAME:	C HARRIL WHITEHURST JR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	15521 MIDLOTHIAN TRNPK SUITE 200		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23113		

NAME:	RAYMOND T AVERY, III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15521 MIDLOTHIAN TRNPK SUITE 200		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23113		

NAME:	CRAIG D BELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15521 MIDLOTHIAN TRNPK SUITE 200		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23113		

NAME:	WILLIAM G FOSTER, JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	President/CEO		
ADDRESS:	15521 Midlothian Turnpike, Suite 200		
CITY/ST/ZIP/CO:	P.O. Box 330 Midlothian, VA 23113		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAYMOND E SANDERS EVP/COO/CRO 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENNIS J FALK EVP/CAO/TREAS 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES E HENDRICKS JR EVP/CCO 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MAX C MOREHEAD JR EVP/LENDING 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REBECCA L KLINE EVP/RETAIL 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD J BALZER, JR DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM B CHANDLER DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. CALVERT ESLEECK, JR. DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE R WHITTEMORE DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL L TOALSON DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	O WOODLAND HOGG, JR DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL A KATZEN DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES A WALTON DIRECTOR 15521 Midlothian Turnpike, Suite 200 P.O Box 330 Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN T WASH SR DIRECTOR 15521 Midlothian Turnpike, Suite 200 P O Box 330 Midlothian, VA 23113	<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/ WILLIAM G FOSTER, JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	WILLIAM G FOSTER, JR, President/CEO PRINTED NAME AND CORPORATE TITLE	4/3/2014 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.			