

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214517654

1.) CORPORATION NAME:

**FAISON GROUP BENEFITS, INC.**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RICHARD A MINARDI JR  
1001 HAXALL POINT, 15TH FL  
POST OFFICE BOX 1122**

SCC ID NO: **05217500**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 6009

CITY/ST/ZIP: ASHLAND, VA 23005

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:	TIMOTHY E DAVIS		
TITLE:	PRES/TREAS		
ADDRESS:	1239 HILLSBORO MILE		
	#501		
CITY/ST/ZIP/CO:	HILLSBORO BEACH, FL 33062		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TIMOTHY K DAVIS		
TITLE:	SECRETARY		
ADDRESS:	1239 HILLBORO MILE		
	#501		
CITY/ST/ZIP/CO:	HILLSBORO BEACH, FL 33062		

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/ TIMOTHY E DAVIS	TIMOTHY E DAVIS, PRES/TREAS	4/2/2014
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.