

1.) CORPORATION NAME:

The McGhee Foundation

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CONNIE D MARR
36276 MOUNTVILLE RD
P. O. BOX 1829**

SCC ID NO: **05781422**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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MIDDLEBURG, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 36276 MOUNTVILLE ROAD
PO BOX 1829

CITY/ST/ZIP: MIDDLEBURG, VA 20118-1829

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:	RICHARD W BERGER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/EXEC DIRECTOR		
ADDRESS:	PO BOX 1443		
CITY/ST/ZIP/CO:	MIDDLEBURG, VA 20118		

NAME:	CONNIE D MARR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	S/T		
ADDRESS:	1948 MORGANS MILL ROAD		
CITY/ST/ZIP/CO:	BLUEMONT, VA 20135		

NAME:	DENIS J COTTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	23500 DOVER ROAD		
CITY/ST/ZIP/CO:	MIDDLEBURG, VA 20117		

NAME:	SANDRA L DANIELSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	36543 MOUNTVILLE RD PO BOX 2092		
CITY/ST/ZIP/CO:	MIDDLEBURG, VA 20118		

NAME:	DON ALEXANDER HAWKINS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	36945 CHARLES TOWN PIKE		
CITY/ST/ZIP/CO:	HILLSBORO, VA 20132		

NAME:	CYNTHIA E McGLUMPHY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4890 ANGUS DRIVE		
CITY/ST/ZIP/CO:	GAINESVILLE, VA 20155-1250		

NAME:	CLAUDE J BRADSHAW, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11913 BLUEBIRD LANE		
CITY/ST/ZIP/CO:	CATHARPIN, VA 20143-1302		
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/ CONNIE D MARR	CONNIE D MARR, S/T	5/13/2013	
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.			