

1.) CORPORATION NAME:

ROANOKE RIVER RAILS TO TRAILS, INC.

DUE DATE: **2/28/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**SANDRA F TANNER
200 S MECKLENBURG AVE
SOUTH HILL, VA**

SCC ID NO: **06116651**

5.) STOCK INFORMATION

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

MECKLENBURG COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 200 SOUTH MECKLENBURG AVE

CITY/ST/ZIP: SOUTH HILL, VA 23970

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:	SANDRA F TANNER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 66		
CITY/ST/ZIP/CO:	200 HARRISON ST LACROSSE, VA 23950		
NAME:	CARL ESPY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 627		
CITY/ST/ZIP/CO:	HALIFAX, VA 24558		
NAME:	ROSCOE EUBANKS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. BOX 125		
CITY/ST/ZIP/CO:	DRAKES BRANCH, VA 23937		
NAME:	JAMES HALASZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. BOX 699		
CITY/ST/ZIP/CO:	HALIFAX, VA 24558		
NAME:	MARCUS HARGRAVE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	300 FOREST DRIVE		
CITY/ST/ZIP/CO:	SOUTH BOSTON, VA 24592		
NAME:	WOODROW KIDD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	727 CHAPTICO ROAD		
CITY/ST/ZIP/CO:	SOUTH HILL, VA 23970		

NAME: RONALD MATTOX TITLE: DIRECTOR ADDRESS: 2605 NOTTOWAY BLVD. CITY/ST/ZIP/CO: VICTORIA, VA 23974	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MELINDA MORAN TITLE: DIRECTOR ADDRESS: PO BOX 1147 CITY/ST/ZIP/CO: CLARKSVILLE, VA 23927	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: P.K. PETTUS TITLE: DIRECTOR ADDRESS: P.O. BOX 417 CITY/ST/ZIP/CO: KEYSVILLE, VA 23947	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: EUGENE PIERCE TITLE: DIRECTOR ADDRESS: P.O. BOX 351 CITY/ST/ZIP/CO: BRODNAX, VA 23920	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NANCY QUICKE TITLE: DIRECTOR ADDRESS: P.O. BOX 214 CITY/ST/ZIP/CO: ALBERTA, VA 23821	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JIMMY WALTERS TITLE: DIRECTOR ADDRESS: 670 HWY 92 CITY/ST/ZIP/CO: BOYDTON, VA 23917	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLETTE T. WOOLRIDGE TITLE: DIRECTOR ADDRESS: P.O. BOX 399 CITY/ST/ZIP/CO: LAWRENCEVILLE, VA 23868	<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/ SANDRA F TANNER	SANDRA F TANNER, PRESIDENT	12/19/2014
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.		