

1.) CORPORATION NAME: The 1ST Virginia Cavalry, Company D	DUE DATE: 4/30/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: RANDY D GLASS 630 S MONTE VISTA DR GLADE SPRING, VA 24340	SCC ID NO: 06151021
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: WASHINGTON COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 630 S MONTE VISTA DR

CITY/ST/ZIP: GLADE SPRING, VA 24340

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: MONTE BAKER	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 261 2ND AVE S				
CITY/ST/ZIP/CO: ASHLAND, VA 36251				

NAME: STEVE FOX	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: VICE PRESIDENT				
ADDRESS: PO BOX 1023				
CITY/ST/ZIP/CO: HONAKER, VA 24260				

NAME: LISA LOVE	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 481 HAYNES AVE				
CITY/ST/ZIP/CO: CHILHOWIE, VA 24319				

NAME: RANDY GLASS	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: TREASURER				
ADDRESS: 630 S MONTE VISTA DR				
CITY/ST/ZIP/CO: GLADE SPRING, VA 24340				

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/ RANDY GLASS	RANDY GLASS, TREASURER	4/30/2012
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.