

1.) CORPORATION NAME: ROANOKE VALLEY ICE ADVOCATES 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NEIL V BIRKHOFF 10 S JEFFERSON ST STE 1400 ROANOKE, VA	DUE DATE: 5/31/2014 SCC ID NO: 06378707 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ROANOKE CITY			
4.) STATE OR COUNTRY OF INCORPORATION: VA			

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 5688 LOST DRIVE CITY/ST/ZIP: ROANOKE, VA 24018

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.
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NAME: RICHARD L KELLEY TITLE: P/S ADDRESS: 5688 LOST DRIVE CITY/ST/ZIP/CO: ROANOKE, VA 24018	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: MATTHEW SKELTON TITLE: VICE PRESIDENT ADDRESS: 7564 COUNTRYWOOD DR. CITY/ST/ZIP/CO: ROANOKE, VA 24018	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: TERRI SKELTON TITLE: VICE PRESIDENT ADDRESS: 7564 COUNTRYWOOD DR CITY/ST/ZIP/CO: ROANOKE, VA 24018	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: DAVID BAUER TITLE: TREASURER ADDRESS: 4341 QUAIL DRIVE NW CITY/ST/ZIP/CO: ROANOKE, VA 24017	<input checked="" type="checkbox"/> OFFICER	<input 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/ RICHARD L KELLEY	RICHARD L KELLEY, P/S	4/14/2014
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.