

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212521045

1.) CORPORATION NAME:

The Cumberland County Museum

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CLIFTON C WHITE
1 ANDERSON HWY
POWHATAN, VA 23139**

SCC ID NO: **06604888**

5.) STOCK INFORMATION

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

CUMBERLAND COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 110
C/O DEPT OF COMMUNITY DEVELOPMENT

CITY/ST/ZIP: CUMBERLAND, VA 23040

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:	ELIZABETH JAMERSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	396 PLEASANT VALLEY RD		
CITY/ST/ZIP/CO:	FARMVILLE, VA 23901		

NAME:	JOANN PETTY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1963 ANDERSON JWU		
CITY/ST/ZIP/CO:	CUMBERLAND, VA 23040		

NAME:	CLIFTON C WHITE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1 ANDERSON HWY		
CITY/ST/ZIP/CO:	POWHATAN, VA 23139		

NAME:	BOB FLIPPEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1469 RIVER ROAD		
CITY/ST/ZIP/CO:	FARMVILLE, VA 23901		

NAME:	FREDDIE GAMAGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 85		
CITY/ST/ZIP/CO:	CARTERSVILLE, VA 23027		

NAME:	Barbara Anne Gamage	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	P.O. Box 72		
CITY/ST/ZIP/CO:	1530 Anderson Highway Cumberland, VA 23040		

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.

<u>/s/ Barbara Anne Gamage</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>Barbara Anne Gamage, TREASURER</u> PRINTED NAME AND CORPORATE TITLE	<u>6/5/2012</u> DATE
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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.