

1.) CORPORATION NAME:

**CvilleRail**

DUE DATE: **5/31/2011**

SCC ID NO: **06767990**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR**

**MEREDITH RICHARDS**

**1621 TRAILRIDGE RD**

**CHARLOTTESVILLE, VA 22903**

5.) STOCK INFORMATION

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

**CHARLOTTESVILLE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1621 TRAILRIDGE ROAD

CITY/ST/ZIP: CHARLOTTESVILLE, VA 22903-

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: ROBERT DEMAURI  
TITLE: VICE CHAIRMAN  
ADDRESS: 285 ROSEMONT DRIVE  
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903-

OFFICER

DIRECTOR

NAME: FRAN HOOPER  
TITLE: SECRETARY  
ADDRESS: PO BOX 124  
CITY/ST/ZIP/CO: COVESVILLE, VA 22931-

OFFICER

DIRECTOR

NAME: MEREDITH RICHARDS  
TITLE: CHAIRPERSON  
ADDRESS: 1621 TRAILRIDGE RD  
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22903-

OFFICER

DIRECTOR

NAME: GERARD DIELY  
TITLE: DIRECTOR  
ADDRESS: 1309 CARTER LANE  
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22901-

OFFICER

DIRECTOR

NAME: MARK MASCOTTE  
TITLE: DIRECTOR  
ADDRESS: OCTAGON PARTNERS  
126 GARRETT ST  
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22902-

OFFICER

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.

<u>/s/ MEREDITH RICHARDS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>MEREDITH RICHARDS, CHAIRPERSON</u> PRINTED NAME AND CORPORATE TITLE	<u>9/30/2011</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.