

1.) CORPORATION NAME:

**Hope Distributed Community Development Corporation**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**SAMUEL G MONTANEZ  
1871 BOYERS RD  
HARRISONBURG, VA 22801**

SCC ID NO: **06840466**

5.) STOCK INFORMATION

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

**ROCKINGHAM COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1871 BOYERS ROAD

CITY/ST/ZIP: HARRISONBURG, VA 22801

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:	SAMUEL G MONTANEZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	4594 LAWYER RD		
CITY/ST/ZIP/CO:	MCGAHEYSVILLE, VA 22840		
NAME:	WILLIAM J TROYER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	O/D		
ADDRESS:	134 RORRER CIRCLE		
CITY/ST/ZIP/CO:	HARRISONBURG, VA 22801		
NAME:	KERRY W WILLIS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	O/D		
ADDRESS:	3257 BAYBROOK DR		
CITY/ST/ZIP/CO:	HARRISONBURG, VA 22801		
NAME:	DEBBIE HUNTLEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2176 SADDLE TRAIL		
CITY/ST/ZIP/CO:	MCGAHEYSVILLE, VA 22840		
NAME:	PEARL PARKS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	152 ELK LANE		
CITY/ST/ZIP/CO:	MCGAHEYSVILLE, VA 22840		
NAME:	Carlos Pulido	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3151 Joppa Ct.		
CITY/ST/ZIP/CO:	Harrisonburg, VA 22801		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Alberto Martinez DIRECTOR 3016 Crystal Spring Lane Harrisonburg, VA 22801	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Carol Martin DIRECTOR 4176 Dry Hollow Rd. Dayton, VA 22821	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Tim Devers DIRECTOR 402 Hickory Grove Circle Harrisonburg, VA 22801	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Vickie Waldrop PRESIDENT 2314 Bear Lithia Rd. Elkton, VA 22827	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Melody Fulk DIRECTOR 531 Snowflake Mill Rd. Weyers Cave, VA 24486	<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/ SAMUEL G MONTANEZ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SAMUEL G MONTANEZ, OFFICER PRINTED NAME AND CORPORATE TITLE	8/22/2012 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.			