

| | | |
|------------------|---|-----------|
| SCC eFile | 2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 213565007 |
|------------------|---|-----------|

| | | | | | |
|--|--|-------|------------|--------|-------|
| 1.) CORPORATION NAME: Dobe Run Corporation | DUE DATE: 11/30/2013 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JAMES VINCENT KNAPP II 5 PELCHAT DR HAMPTON, VA | SCC ID NO: 06862221 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HAMPTON CITY | 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> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 5,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 5,000 | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: VA | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11935 TIDEWATER TRAIL

CITY/ST/ZIP: SALUDA, VA 23149

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: ALYX M KNAPP TITLE: PRESIDENT ADDRESS: 11935 TIDEWATER TRAIL CITY/ST/ZIP/CO: SALUDA, VA 23149 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: JAMES V KNAPP II TITLE: SECRETARY ADDRESS: 5 Pelchat Dr CITY/ST/ZIP/CO: HAMPTON, VA 23666 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| NAME: CALEB J KNAPP TITLE: VICE PRESIDENT ADDRESS: 5 PELCHAT DR CITY/ST/ZIP/CO: HAMPTON, VA 23666 | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| NAME: DARIA M KNAPP TITLE: ASST TREASURER ADDRESS: 5 PELCHAT DR CITY/ST/ZIP/CO: HAMPTON, VA 23666 | <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/ ALYX M KNAPP | ALYX M KNAPP, PRESIDENT | 2/14/2014 |
| 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.