

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214553596
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1.) CORPORATION NAME: <b>NorthFourth, Inc.</b>	DUE DATE: <b>12/31/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>JASON ROBINSON 147 FAIRFIELD WAY WOODLAWN, VA</b>	SCC ID NO: <b>07452170</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>CARROLL COUNTY</b>	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>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED				
COMMON	100				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 147 FAIRFIELD WAY  CITY/ST/ZIP: WOODLAWN, VA 24381	
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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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JASON ALLEN ROBINSON		
TITLE: PRESIDENT		
ADDRESS: 147 FAIRFIELD WAY		
CITY/ST/ZIP/CO: WOODLAWN, VA 24381		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLES LEE PARSONS		
TITLE: DIRECTOR		
ADDRESS: 151 TIMBERLAND DRIVE		
CITY/ST/ZIP/CO: WYTHEVILLE, VA 23482		

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/ JASON ALLEN ROBINSON	JASON ALLEN ROBINSON, PRESIDENT	12/20/2014
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.