

1.) CORPORATION NAME:

GLOUCESTER REVOLVING LOAN FUND, INC.

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LINDSEY A CARNEY
12350 JEFFERSON AVE STE 300
NEWPORT NEWS, VA**

SCC ID NO: **07487812**

5.) STOCK INFORMATION

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

NEWPORT NEWS CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 2240

CITY/ST/ZIP: GLOUCESTER, VA 23061

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:	JAMES ROBINSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 2318		
CITY/ST/ZIP/CO:	GLOUCESTER, VA 23061		
NAME:	STEVEN D CALLIS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	CHESAPEAKE BANK		
CITY/ST/ZIP/CO:	PO BOX 726 GLOUCESTER, VA 23061		
NAME:	PAT HOUTZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 96		
CITY/ST/ZIP/CO:	WARE NECK, VA 23178		
NAME:	NAM VU	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 101		
CITY/ST/ZIP/CO:	BENA, VA 23018		
NAME:	Cordon Davis	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 1068		
CITY/ST/ZIP/CO:	Gloucester, VA 23061		
NAME:	Joe Heyman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 758		
CITY/ST/ZIP/CO:	Gloucester, VA 23061		

NAME:	Robert Hatten	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5466 Colrairie Point		
CITY/ST/ZIP/CO:	Gloucester, VA 23061		

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/ JAMES ROBINSON	JAMES ROBINSON, PRESIDENT	3/29/2014
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.