

1.) CORPORATION NAME:
**AUGUSTA COUNTY 4-H & FFA MARKET ANIMAL SHOW
ANDSALE**

DUE DATE: **11/30/2013**

SCC ID NO: **07576069**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:
**MARK W BOTKIN
3190 PEOPLES DR
HARRISONBURG, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HARRISONBURG CITY (FILED IN ROCKINGHAM COUNTY)

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 501 Knightly Mill Road
CITY/ST/ZIP: Mount Sidney, VA 24467

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:	Bruce Bowman	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1195 Barrenridge Road		
CITY/ST/ZIP/CO:	Fishersville, VA 22939		

NAME:	Faye Giles	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	P.O. Box 90		
CITY/ST/ZIP/CO:	Verona, VA 24482		

NAME:	Christine Auville	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	501 Knightly Mill Road		
CITY/ST/ZIP/CO:	Mount Sidney, VA 24467		

NAME:	Teresa Bradley	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	157 Spottswood Road		
CITY/ST/ZIP/CO:	Greenville, VA 24440		

NAME:	Jon Cromer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	340 Hanger Mill Road		
CITY/ST/ZIP/CO:	Churchville, VA 24421		

NAME:	Matt Hickey	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	160 Miller Farm Road		
CITY/ST/ZIP/CO:	Staunton, VA 24401		

NAME: Shane McCray TITLE: DIRECTOR ADDRESS: 897 Eakle Road CITY/ST/ZIP/CO: Staunton, VA 24401	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Michael Ruleman TITLE: DIRECTOR ADDRESS: 2107 West Beverly Street CITY/ST/ZIP/CO: Staunton, VA 24401	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Eric Stogdale TITLE: DIRECTOR ADDRESS: 138 Laurel Hill Road CITY/ST/ZIP/CO: Verona, VA 24482	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Alvin Trout TITLE: DIRECTOR ADDRESS: 1639 Old Providence Road CITY/ST/ZIP/CO: Raphine, VA 24472	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Shirley Kauffman TITLE: DIRECTOR ADDRESS: 34 Windy Creek Lane CITY/ST/ZIP/CO: Mount Sidney, VA 24467	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: David Shifflett TITLE: DIRECTOR ADDRESS: 368 Patterson Mill Road CITY/ST/ZIP/CO: Grottoes, VA 24441	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: June Cohron TITLE: DIRECTOR ADDRESS: 157 Draft Avenue CITY/ST/ZIP/CO: Stuarts Draft, VA 24477	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Dakota Boyers TITLE: DIRECTOR ADDRESS: 60 Old Providence Road CITY/ST/ZIP/CO: Greenville, VA 24440	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Kate Ramsey TITLE: DIRECTOR ADDRESS: 83 Deerwood Lane CITY/ST/ZIP/CO: Lynhurst, VA 22952	<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/ Bruce Bowman	Bruce Bowman, CHAIRMAN	2/19/2014
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.