

1.) CORPORATION NAME:

HagerSmith Design P.A., Company (USED IN VA.

BY:HagerSmith Design P.A.)

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RUSSELL O SLAYTON JR
411 S HICKS ST
PO BOX 580**

LAWRENCEVILLE, VA 23868

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

BRUNSWICK COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

DUE DATE: **5/31/2012**

SCC ID NO: **F0430969**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 SOUTH DAWSON STREET

CITY/ST/ZIP: RALEIGH, NC 27601

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:	CHARLES A CONNER	
TITLE:	PRESIDENT	
ADDRESS:	218 WOODLAND ROAD	
CITY/ST/ZIP/CO:	LITTLETON, NC 27850	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SCOTT T IDOL	
TITLE:	VICE PRESIDENT	
ADDRESS:	3312 FELTON PL	
CITY/ST/ZIP/CO:	RALEIGH, NC 27612	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHARRON C. SCROGGIN	
TITLE:	VICE PRESIDENT	
ADDRESS:	7620 REAMS COURT	
CITY/ST/ZIP/CO:	APEX, NC 27502	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES W.M. SMITH	
TITLE:	VICE PRESIDENT	
ADDRESS:	3015 WAKE FOREST ROAD	
CITY/ST/ZIP/CO:	RALEIGH, NC 27609	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES E. THIEM III	
TITLE:	VICE PRESIDENT	
ADDRESS:	634 N. BLOUNT ST.	
CITY/ST/ZIP/CO:	RALEIGH, NC 27604	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES S LOYACK	
TITLE:	PRESIDENT	
ADDRESS:	4311 BROOKSHIRE ROAD	
CITY/ST/ZIP/CO:	DURHAM, NC 27707	

NAME: Bryan D. Gibson TITLE: VICE PRESIDENT ADDRESS: 383 Annali Way CITY/ST/ZIP/CO: Wendell, NC 27591	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Sarah E. Troutman TITLE: VICE PRESIDENT ADDRESS: 705 Glenwood Avenue CITY/ST/ZIP/CO: Raleigh, NC 27605	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ CHARLES A CONNER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CHARLES A CONNER, PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/22/2012 DATE
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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.