

1.) CORPORATION NAME:

ARCH COAL, INC.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0465627**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000,000
PREFER	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: CITY PLACE ONE, STE 300
ATTN TAX DEPT

CITY/ST/ZIP: ST LOUIS, MO 63141

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:	JOHN W EAVES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/COO		
ADDRESS:	CITY PLACE ONE		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63141		

NAME:	C DAVID STEELE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	CITY PLACE ONE		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63141		

NAME:	STEVEN F LEER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	CITY PLACE ONE		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63141		

NAME:	JAMES R BOYD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	CITY PLACE ONE		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63141		

NAME:	Paul Lang	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	CityPlace One		
CITY/ST/ZIP/CO:	St. Louis, MO 63141		

NAME:	John Drexler	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	CityPlace One		
CITY/ST/ZIP/CO:	St. Louis, MO 63141		

NAME: Robert Jones TITLE: SECRETARY ADDRESS: CityPlace One CITY/ST/ZIP/CO: St. Louis, MO 63141	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: David Warnecke TITLE: VICE PRESIDENT ADDRESS: CityPlace One CITY/ST/ZIP/CO: St. Louis, MO 63141	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: David Hartley TITLE: VICE PRESIDENT ADDRESS: CityPlace One CITY/ST/ZIP/CO: St. Louis, MO 63141	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: James Florczak TITLE: TREASURER ADDRESS: CityPlace One CITY/ST/ZIP/CO: St. Louis, MO 63141	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: Jon Ploetz TITLE: ASST SECRETARY ADDRESS: CityPlace One CITY/ST/ZIP/CO: St. Louis, MO 63141	<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/ C DAVID STEELE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	C DAVID STEELE, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE
7/26/2012 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.	