

1.) CORPORATION NAME:

EASTOVER MINING COMPANY

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1339797**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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GLEN ALLEN, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

KY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 526 S CHURCH ST
DEC 45A

CITY/ST/ZIP: CHARLOTTE, NC 28202

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:	KEITH G BUTLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, Tax		
ADDRESS:	550 S. TRYON STREET		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28202		

NAME:	DAVID S MALTZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CORP SEC		
ADDRESS:	550 S. TRYON STREET		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28202		

NAME:	NANCY M WRIGHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASSISTANT SEC		
ADDRESS:	550 S. TRYON STREET		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28202		

NAME:	LYNN J GOOD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	550 S. TRYON STREET		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28202		

NAME:	B. Keith Trent	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	550 S. Tryon St.		
CITY/ST/ZIP/CO:	Charlotte, NC 28202		

NAME:	W. Bryan Buckler	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	550 S. Tryon St.		
CITY/ST/ZIP/CO:	Charlotte, NC 28202		

NAME: Donna T. Council TITLE: ASST TREASURER ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Stephen G. De May TITLE: TREASURER ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: B. Keith Trent TITLE: PRESIDENT ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Steven K. Young TITLE: Controller ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Steven K. Young TITLE: VICE PRESIDENT ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Steven K. Young TITLE: Chief Acctg Off ADDRESS: 550 S. Tryon St. CITY/ST/ZIP/CO: Charlotte, NC 28202	<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/ NANCY M WRIGHT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	NANCY M WRIGHT, ASSISTANT SEC PRINTED NAME AND CORPORATE TITLE	6/17/2013 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.		