

1.) CORPORATION NAME:

**THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF
BRISTOL, INC.**

DUE DATE: **6/30/2013**

SCC ID NO: **F1384322**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PETER CURCIO
600 CUMBERLAND ST
BRISTOL, VA**

5.) STOCK INFORMATION

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

BRISTOL CITY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 M. L. KING JR BLVD

CITY/ST/ZIP: BRISTOL, TN 37620

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: STEVE DIXON TITLE: PAST PRESIDENT ADDRESS: 29 CROWN CIRCLE CITY/ST/ZIP/CO: BRISTOL, TN 37620	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MEMBERATLARGE NELSON LINK TITLE: PRESIDENT ADDRESS: 132 SEQUOIA LANE CITY/ST/ZIP/CO: BRISTOL, TN 37620	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEVIN DYE TITLE: VICE PRESIDENT ADDRESS: 300 LEE STREET CITY/ST/ZIP/CO: BRISTOL, VA 24201	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBBIE PHILLIPS TITLE: PRESIDENT ADDRESS: C/O CORPORATE IMAGE CITY/ST/ZIP/CO: 619 VOLUNTEER PKWY BRISTOL, TN 37620	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANITA GREENE TITLE: SECRETARY ADDRESS: C/O STRONGWELL CITY/ST/ZIP/CO: 400 COMMONWEALTH AVE BRISTOL, VA 24201	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BILL SORAH TITLE: MEMBERATLARGE ADDRESS: 214 MELODY LANE CITY/ST/ZIP/CO: BRISTOL, TN 37620	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAN BIEGER DIRECTOR 565 VOLUNTEER PKWY. BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LISA BULLINS DIRECTOR 112 GREINER DRIVE BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM BUTCHER DIRECTOR 120 SKYLINE DRIVE BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY LILLY DIRECTOR 100 FOREST HILLS DR BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK LINEBURG DIRECTOR 222 OAK STREET BRISTOL, VA 24201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	S. HUGHES MELTON DIRECTOR 23104 VIRGINIA TRAIL BRISTOL, VA 24202	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TODD MUNCY DIRECTOR 300 MOORE ST, STE B BRISTOL, VA 24201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLIFF QUESENBERRY DIRECTOR 15217 WILDERNESS RD BRISTOL, VA 24202	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NATE GLOVER DIRECTOR 225 GALWAY ROAD BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANINE MYATT DIRECTOR 815 PIEDMONT AVENUE BRISTOL, VA 24201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT RAINWATER DIRECTOR 112 S. HAMPTON DRIVE BRISTOL, TN 37620	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	CHARLIE EDMONDS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3907 JESSEES MILL RD		
CITY/ST/ZIP/CO:	CLEVELAND, VA 24225		

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/ ROBBIE PHILLIPS	ROBBIE PHILLIPS, PRESIDENT	6/19/2013
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.