

1.) CORPORATION NAME:

First Bank of Virginia (USED IN VA BY: FirstBank)

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JIMMY G GRUBBS
150 VIRGINIA AVE
PO BOX 1475**

SCC ID NO: **F1497579**

WYTHEVILLE, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

WYTHE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 300 SW Broad Street

CITY/ST/ZIP: Southern Pines, NC 28387

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:	R WALTON BROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	718 LUCKY RUN		
CITY/ST/ZIP/CO:	LATTA, SC 29565		

NAME:	JOHN F BURNS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXECUTIVE VP		
ADDRESS:	335 SWOOP DRIVE		
CITY/ST/ZIP/CO:	SOUTHERN PINES, NC 28387		

NAME:	ANNA G HOLLERS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC VP/S/COO		
ADDRESS:	PO BOX 508		
CITY/ST/ZIP/CO:	TROY, NC 27371-0508		

NAME:	RICHARD H. MOORE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO/PRESIDENT		
ADDRESS:	300 SW Broad Street		
CITY/ST/ZIP/CO:	Southern Pines, NC 28387		

NAME:	ERIC P. CREDLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	300 SW Broad Street		
CITY/ST/ZIP/CO:	Southern Pines, NC 28387		

NAME:	DANIEL T. BLUE, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	205 FAYETTEVILLE STREET		
CITY/ST/ZIP/CO:	RALEIGH, NC 27601		

NAME:	JACK D BRIGGS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P O BOX 218		
CITY/ST/ZIP/CO:	DENTON, NC 27239		
NAME:	DAVID L BURNS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 159		
CITY/ST/ZIP/CO:	LAUREL HILL, NC 28351		
NAME:	MARY CLARA CAPEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 826		
CITY/ST/ZIP/CO:	TROY, NC 27371		
NAME:	JAMES C CRAWFORD, III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	209 MCIVER STREET		
CITY/ST/ZIP/CO:	CHERAW, SC 29520		
NAME:	JAMES G HUDSON, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3 PADDOCK LANE		
CITY/ST/ZIP/CO:	THOMASVILLE, NC 27360		
NAME:	GEORGE R PERKINS, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1823 BOONE TRAIL ROAD		
CITY/ST/ZIP/CO:	SANFORD, NC 27330		
NAME:	THOMAS F PHILLIPS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5660 NC HIGHWAY 22		
CITY/ST/ZIP/CO:	CARTHAGE, NC 28327		
NAME:	FREDERICK L TAYLOR II	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1207 CEDAR CREEK ROAD		
CITY/ST/ZIP/CO:	BISCOE, NC 27209		
NAME:	VIRGINIA C THOMASSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 1744		
CITY/ST/ZIP/CO:	SOUTHERN PINES, NC 28388		
NAME:	DENNIS A WICKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1201 BURNS DRIVE		
CITY/ST/ZIP/CO:	SANFORD, NC 27330		
NAME:	JOHN C WILLIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	626 EAST MAIN STREET		
CITY/ST/ZIP/CO:	TROY, NC 27371		

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/ ERIC P. CREDLE	ERIC P. CREDLE, EVP/CFO	1/31/2014
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.		