

1.) CORPORATION NAME:

AMERICAN FARM MORTGAGE COMPANY, INC.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1543679**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8901 GREENEWAY COMMONS PL
STE 200

CITY/ST/ZIP: LOUISVILLE, KY 40220

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:	KATHY A DAILY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	8901 GREENEWAY COMMONS PL		
	STE 200		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40220		

NAME:	BRIAN BANET	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	8901 GREENEWAY COMMONS PL		
	STE 200		
CITY/ST/ZIP/CO:	LOUISVILLE, VA 40220		

NAME:	DONALD POORE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8901 GREENEWAY COMMONS PL		
	SUITE 200		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40220		

NAME:	KEVIN D BECKEMEYER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8901 GREENEWAY COMMONS PL		
	SUITE 200		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40220		

NAME:	KENNETH ETIENNE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8901 GREENEWAY COMMONS PL		
	SUITE 200		
CITY/ST/ZIP/CO:	LOUISVILLE, KY 40220		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	C. VINCE KASIAR DIRECTOR 8901 GREENEWAY COMMONS PL SUITE 200 LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN B ROWE DIRECTOR 8901 GREENEWAY COMMONS PL SUITE 200 LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL TISON DIRECTOR 8901 GREENEWAY COMMONS PL SUITE 200 LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICK J WILLIAMS DIRECTOR 8901 GREENEWAY COMMONS PL SUITE 200 LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK A. HAMILTON VICE PRESIDENT 8901 GREENEWAY COMMONS PLACE SUITE 200 LOUISEVILLE, KY 40220	<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/ BRIAN BANET SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRIAN BANET, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/29/2013 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.			