

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		
CITY/ST/ZIP/CO:	STE 200 LOUISVILLE, KY 40220		

NAME:	PATRICK A. HAMILTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8901 GREENEWAY COMMONS PLACE		
CITY/ST/ZIP/CO:	SUITE 200 LOUISEVILLE, KY 40220		

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

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

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

NAME: C. VINCE KASIAR TITLE: DIRECTOR ADDRESS: 8901 GREENEWAY COMMONS PL SUITE 200 CITY/ST/ZIP/CO: LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: DONALD POORE TITLE: DIRECTOR ADDRESS: 8901 GREENEWAY COMMONS PL SUITE 200 CITY/ST/ZIP/CO: LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MARTIN B ROWE TITLE: DIRECTOR ADDRESS: 8901 GREENEWAY COMMONS PL SUITE 200 CITY/ST/ZIP/CO: LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MICHAEL TISON TITLE: DIRECTOR ADDRESS: 8901 GREENEWAY COMMONS PL SUITE 200 CITY/ST/ZIP/CO: LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: RICK J WILLIAMS TITLE: CHAIRMAN ADDRESS: 8901 GREENEWAY COMMONS PL SUITE 200 CITY/ST/ZIP/CO: LOUISVILLE, KY 40220	<input type="checkbox"/> OFFICER <input checked="" 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	BRIAN BANET, SECRETARY	4/30/2013
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.		