

1.) CORPORATION NAME: HOMETOWN BENEFITS, INC.	DUE DATE: 10/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: STEVEN L HIGGS 9 FRANKLIN RD SW ROANOKE, VA	SCC ID NO: F1644600				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ROANOKE CITY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>200</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	200
CLASS	AUTHORIZED				
COMMON	200				
4.) STATE OR COUNTRY OF INCORPORATION: NY					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5 ORVILLE DRIVE
suite 400

CITY/ST/ZIP: BOHEMIA, NY 11716

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: DANIEL C WEBER TITLE: PRES/DIR ADDRESS: 5 ORVILLE DRIVE CITY/ST/ZIP/CO: BOHEMIA, NY 11742	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: JUDITH A WEBER TITLE: VP/DIR ADDRESS: 5 ORVILLE DRIVE CITY/ST/ZIP/CO: BOHEMIA, NY 11716	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: REBECCA KEIFFERT TITLE: DIRECTOR ADDRESS: 5 ORVILLE DR. CITY/ST/ZIP/CO: BOHEMIA, NY 11716	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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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/ DANIEL C WEBER	DANIEL C WEBER, PRES/DIR	8/23/2013
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.