

1.) CORPORATION NAME:

CG ALLIANCE, INC.

DUE DATE: **12/31/2010**

SCC ID NO: **F1661034**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
CYNTHIA M FOLKINS
454 FOX LANE
LOUISA, VA 23093**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUISA COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

GA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 454 FOX LANE

CITY/ST/ZIP: LOUISA, VA 23093-

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: GREGORY R FOLKINS
TITLE: PRESIDENT
ADDRESS: 454 FOX LANE
CITY/ST/ZIP/CO: LOUISA, VA 23093-

OFFICER

DIRECTOR

NAME: CYNTHIA M FOLKINS
TITLE: SECRETARY
ADDRESS: 454 FOX LANE
CITY/ST/ZIP/CO: LOUISA, VA 23093-

OFFICER

DIRECTOR

NAME: CYNTHIA M FOLKINS
TITLE: TREASURER
ADDRESS: 454 FOX LANE
CITY/ST/ZIP/CO: LOUISA, VA 23093-

OFFICER

DIRECTOR

NAME: CYNTHIA M FOLKINS
TITLE: CHAIRMAN
ADDRESS: 454 FOX LANE
CITY/ST/ZIP/CO: LOUISA, VA 23093-

OFFICER

DIRECTOR

NAME: CYNTHIA L FOX
TITLE: SFO
ADDRESS: 422 N UNION STREET
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314-

OFFICER

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/ CYNTHIA M FOLKINS
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

CYNTHIA M FOLKINS,
SECRETARY
PRINTED NAME AND CORPORATE
TITLE

9/15/2011
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.