

1.) CORPORATION NAME: D. R. Cox & Company, Inc.	DUE DATE: 3/31/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA	SCC ID NO: F1702788				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	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>2,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	2,000
CLASS	AUTHORIZED				
COMMON	2,000				
4.) STATE OR COUNTRY OF INCORPORATION: TN					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4807 NEWCOM AVE

CITY/ST/ZIP: KNOXVILLE, TN 37919

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: KATHRYN C WOODALL TITLE: P/D ADDRESS: PO BOX 11665 CITY/ST/ZIP/CO: KNOXVILLE, TN 37939	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: NATHAN WOODALL TITLE: SECRETARY ADDRESS: PO BOX 11665 CITY/ST/ZIP/CO: KNOXVILLE, TN 37939	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: JUDY B COX TITLE: DIRECTOR ADDRESS: PO BOX 11665 CITY/ST/ZIP/CO: KNOXVILLE, TN 37939	<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/ KATHRYN C WOODALL	KATHRYN C WOODALL, P/D	3/14/2014
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.