

**COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION  
BUREAU OF FINANCIAL INSTITUTIONS  
ANNUAL REPORT OF INDUSTRIAL LOAN ASSOCIATIONS  
FOR THE YEAR ENDING DECEMBER 31, 2011**

**GENERAL INFORMATION**

Name and authorized location of association \_\_\_\_\_ Name and mailing address of parent company, if any \_\_\_\_\_

Mailing address (if different from authorized) \_\_\_\_\_

E-Mail address (if available) \_\_\_\_\_

Name and title of the chief executive officer of the association \_\_\_\_\_

Name and occupation of all directors who have continuously owned and controlled unpledged and unencumbered shares of stock of at least \$100 par value and year joined firm. \_\_\_\_\_

Provide the following information with respect to loans made by the association during the calendar year:

SIZE OF LOANS	TYPE OF LOAN					
	COMMERCIAL		MORTGAGE		CONSUMER	
	Number of Loans	Aggregate Dollar Amount	Number of Loans	Aggregate Dollar Amount	Number of Loans	Aggregate Dollar Amount
Up to \$ 5,000						
\$ 5,001 - \$25,000						
\$25,001 - \$100,000						
Over \$100,000						
<b>TOTALS</b>						

State the range of interest rates (APR) and points charged during the year (highest and lowest).

	Interest Rates	Points Charged
Commercial	_____	_____
Mortgage	_____	_____
Consumer	_____	_____

Analysis Of Delinquent Accounts As Of December 31

Accounts Past Due For A Period Of:	NUMBER	DOLLAR AMOUNT
One to 60 days.....	_____	\$ _____
61 days to 90 days.....	_____	\$ _____
More than 90 days.....	_____	\$ _____
<b>TOTAL.....</b>	_____	\$ _____
Foreclosures During Calendar Year	_____	\$ _____

BALANCE SHEET  
As of December 31, 2011

ASSETS

1. Cash and due from depository institutions		\$ _____
2. Securities		_____
3. Loans receivable		_____
Less: Valuation reserve	_____	
Unearned income	_____	
Net loans receivable		_____
4. Land and building		_____
5. Equipment, furniture and fixtures		_____
6. Other real estate owned		_____
7. Other assets (itemize)		_____
8. Total Assets		\$ _____

LIABILITIES

9. Borrowings from financial institutions		\$ _____
10. Borrowings from individuals		_____
11. Borrowings from shareholders		_____
12. Other borrowings		_____
13. Total borrowed money		_____
14. Accrued interest		_____
15. Accrued taxes		_____
16. Mortgage indebtedness and capitalized lease obligations		_____
17. Other liabilities		_____
18. Total Liabilities		\$ _____

CAPITAL

19. Preferred stock		\$ _____
20. Common stock		_____
21. Surplus		_____
22. Undivided profits		_____
23. Total Capital		_____
24. Total Liabilities and Capital		\$ _____



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Individual to be contacted with respect to questions which may arise from this report (name, title, address, and telephone number):

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Provide the name, title, address and **telephone number, fax number and e-mail address** for the individual to be contacted with respect to:

(a) Scheduling Examinations

(b) Consumer Complaints

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Please list and describe, in detail, any lawsuits which were filed against the licensee during the year.

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**AFFIDAVIT**

State of \_\_\_\_\_)

County or City of \_\_\_\_\_)

I, \_\_\_\_\_, being the \_\_\_\_\_  
(Name of Officer of Licensee) (Title)

of \_\_\_\_\_  
(Name of Licensee)

swear or affirm that, to the best of my information and belief, the facts in this report, including any accompanying schedules and statements are true.

\_\_\_\_\_  
Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

Registration Number of Notary: \_\_\_\_\_  
My commission expires: \_\_\_\_\_