

E. J. FACE, JR.
COMMISSIONER OF
FINANCIAL INSTITUTIONS



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**STATE CORPORATION COMMISSION
BUREAU OF FINANCIAL INSTITUTIONS**

December 17, 2008

TO THE LICENSEE ADDRESSED

§ 6.1-237.2 of the Code of Virginia requires Virginia Industrial Loan Associations to file an annual report with the State Corporation Commission. Reports covering operations during the preceding calendar year are to be filed no later than March 25, 2009. The Statute does not provide for an extension of the filing deadline.

Please complete the attached annual report form and file it with the Bureau of Financial Institutions, 1300 East Main Street, Suite 800, P. O. Box 640, Richmond, Virginia 23218-0640. Incomplete reports cannot be accepted for filing and will be returned. Attachments should be submitted on 8 1/2" x 11" pages.

If you have any questions concerning the annual report, you may contact Robert F. Mednikov at (804) 371-9692.

Very truly yours,

Nicholas C. Kyrus
Deputy Commissioner

attachment

**COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION
BUREAU OF FINANCIAL INSTITUTIONS
ANNUAL REPORT OF INDUSTRIAL LOAN ASSOCIATIONS
FOR THE YEAR ENDING DECEMBER 31, 2008**

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. _____

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						
TOTALS						

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.....	_____	\$ _____
TOTAL.....	_____	\$ _____

BALANCE SHEET
As of December 31, 2008

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		\$ _____

Individual To Be Contacted With Respect To Questions Which May Arise From This Report (Name, Title, Address, And Telephone Number):

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

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

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: _____