

1.) CORPORATION NAME: **KENT GARDENS RECREATION CLUB, INCORPORATED** DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **KEVIN N MULCAHY** SCC ID NO: **00763557**

**6811 LUMSDEN ST
MCLEAN, VA 22101-5126**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 41
CITY/ST/ZIP: MCLEAN, VA 22101

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: CRAIG LIDDELL TITLE: PRESIDENT ADDRESS: 6609 BRIAR HILL COURT CITY/ST/ZIP/CO: MCLEAN, VA 22101	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JENNIFER SCHANTZ TITLE: SECRETARY ADDRESS: 1616 ROSEMONT COURT CITY/ST/ZIP/CO: MCLEAN, VA 22101	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TIM DAR JUAN TITLE: TREASURER ADDRESS: 6521 ORLAND STREET CITY/ST/ZIP/CO: FALLS CHURCH, VA 22043	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLOTTE HELIE TITLE: DIRECTOR ADDRESS: 1722 MERRYHILL PLACE CITY/ST/ZIP/CO: MCLEAN, VA 22101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KURT MICKELWAIT TITLE: DIRECTOR ADDRESS: 6543 ORLAND STREET CITY/ST/ZIP/CO: FALLS CHURCH, VA 22043	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEVIN MULCAHY TITLE: DIRECTOR ADDRESS: 6811 LUMSDEN ST CITY/ST/ZIP/CO: MCLEAN, VA 22101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: LISA RUSSELL TITLE: DIRECTOR ADDRESS: 6719 MONTOUR DR CITY/ST/ZIP/CO: FALLS CHURCH, VA 22043	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: MARCUS SIMON TITLE: DIRECTOR ADDRESS: 6719 MONTOUR DRIVE CITY/ST/ZIP/CO: FALLS CHURCH, VA 22043	<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/ KEVIN MULCAHY	KEVIN MULCAHY, DIRECTOR	10/8/2012
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.