

SCC eFile

2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

216517163

1.) CORPORATION NAME:

MT. CRAWFORD COMMUNITY CENTER, INC.

DUE DATE: **6/30/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL BECKLER
P.O. BOX 241
MT. CRAWFORD, VA**

SCC ID NO: **00780296**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ROCKINGHAM COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 241

CITY/ST/ZIP: MT CRAWFORD, VA 22841

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: ALEXA CAMPBELL
TITLE: PRESIDENT
ADDRESS: 201 MILL ST
CITY/ST/ZIP/CO: MT CRAWFORD, VA 22841

OFFICER DIRECTOR

NAME: CHRIS CAMPBELL
TITLE: VICE PRESIDENT
ADDRESS: 65 BRIDLEBIT LANE
CITY/ST/ZIP/CO: MT CRAWFORD, VA 22841

OFFICER DIRECTOR

NAME: MICHAEL BECKLER
TITLE: TREASURER
ADDRESS: 2740 EVERSOLE ROAD
CITY/ST/ZIP/CO: HARRISONBURG, VA 22802

OFFICER DIRECTOR

NAME: GENE KNICELY
TITLE: SECRETARY
ADDRESS: 890 GREENDALE ROAD
CITY/ST/ZIP/CO: HARRISONBURG, VA 22801

OFFICER DIRECTOR

NAME: CAITLYN DAVIS
TITLE: DIRECTOR
ADDRESS: 6041 SCHOLARS ROAD
CITY/ST/ZIP/CO: MT CRAWFORD, VA 22801

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/ ALEXA CAMPBELL

ALEXA CAMPBELL, PRESIDENT

5/5/2016

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.