

1.) CORPORATION NAME:

**ASSOCIATION FOR THE PRESERVATION OF
VIRGINIA ANTIQUITIES**

DUE DATE: **3/14/2013**

SCC ID NO: **00853267**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LEWIS F. POWELL, III
HUNTON & WILLIAMS
951 E BYRD ST RIVERFRONT PLZ E TWR

RICHMOND, VA 23219-4074**

5.) STOCK INFORMATION

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

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 204 W FRANKLIN ST
CITY/ST/ZIP: RICHMOND, VA 23220-5012

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:	ANNE GEDDY CROSS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	11544 HANOVER COURTHOUSE RD		
CITY/ST/ZIP/CO:	HANOVER, VA 23069		
NAME:	ALEXANDER C GRAHAM, JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3801 OLD GUN ROAD WEST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23113		
NAME:	MS GENEVIEVE P KELLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	PO BOX 92		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22902		
NAME:	GARY OMIETER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5612 ST JAMES CT		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		
NAME:	JOSEPH CHEELY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	413 DELLBROOKS PLACE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23233		
NAME:	MS ELIZABETH S KOSTELNY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	204 WEST FRANKLIN ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23220		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Keneth Adams DIRECTOR 1236 Mount Pleasant Rd King William, VA 23086	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Karen Berkness DIRECTOR 3801 Old Gun Road West Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Warren M. Billings DIRECTOR 12 Swallow Rd New Orleans, LA 70125	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Audrey Paulette Davis DIRECTOR 30001 Veazey Terrace, NW VAn Ness North Apt. #416 Washington, DC 20008	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Basil I Gooden DIRECTOR 600 East Main Street, Suite 300 Richmond, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John H Guy IV DIRECTOR 6046 Edgewood Terrace Alexandria, VA 22307	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kevin R Hardwick DIRECTOR 3943 Dixie Ridge Run Penn Laird, VA 22846	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Mary Howard DIRECTOR 627 Park Avenue Charlottesville, VA 22902	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Catesby Jones DIRECTOR P. O. Box 137 White Marsh, VA 23692	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Pettus LeCompte DIRECTOR 906 Westover Rd Richmond, VA 23220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Anne Carter Lee DIRECTOR P. O. Box 477 Rocky Mount, VA 24151	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	Patti Loughridge	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	335 Clovelly Road		
CITY/ST/ZIP/CO:	Richmond, VA 23221		
NAME:	William Luke	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10 Summit Drive		
CITY/ST/ZIP/CO:	Henrico, VA 23229		
NAME:	Trip Pollard	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3800 Darby Dr.		
CITY/ST/ZIP/CO:	Midlothian, VA 23113		
NAME:	Rebecca Starling	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1200 Washington Ave		
CITY/ST/ZIP/CO:	Fredericksburg, VA 22401		
NAME:	Reggie Stewart	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11606 Arbor Highlands Terrace		
CITY/ST/ZIP/CO:	Chester, VA 23831		
NAME:	Mark O Webb	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2003 Monument Ave.		
CITY/ST/ZIP/CO:	Richmond, VA 23220		
NAME:	Jane Yerkes	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	116 Berkely Lane		
CITY/ST/ZIP/CO:	Yorktown, VA 23185		
NAME:	Mary Zayde Zeugner	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6408 Roselawn Road		
CITY/ST/ZIP/CO:	Richmond, VA 23226		
NAME:	Ken Farmer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	105 Harrison Street		
CITY/ST/ZIP/CO:	Radford, VA 24241		

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.

<u>/s/ MS ELIZABETH S KOSTELNY</u>	<u>MS ELIZABETH S KOSTELNY,</u>	<u>3/14/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.