

1.) CORPORATION NAME:

DUNN LORING WOODS CIVIC ASSOCIATION, INC.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WAYNE E COMER
8224 COLBY CT
VIENNA, VA**

SCC ID NO: **01053644**

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: 8224 COLBY CT

CITY/ST/ZIP: VIENNA, VA 22180

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: KEN QUINCY TITLE: PRESIDENT ADDRESS: 8225 BUCKNELL DRIVE CITY/ST/ZIP/CO: VIENNA, VA 22180	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: FRANCESCO PIAZZA TITLE: 2ND VP ADDRESS: 8324 SYRACUSE CIRCLE CITY/ST/ZIP/CO: VIENNA, VA 22180	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MELVIN ROSE TITLE: 1ST VP ADDRESS: 8200 BUCKNELL DR CITY/ST/ZIP/CO: VIENNA, VA 22180	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVEN BERGERON TITLE: TREASURER ADDRESS: 8220 BUCKNELL DRIVE CITY/ST/ZIP/CO: VIENNA, VA 22180	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KATHY ARPA TITLE: DIRECTOR ADDRESS: 2717 BOWLING GREEN DR CITY/ST/ZIP/CO: VIENNA, VA 22180	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ELEANOR McCANN TITLE: DIRECTOR ADDRESS: 8536 PEPPERDINE DR. CITY/ST/ZIP/CO: VIENNA, VA 22180	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: WILLIAM MOFFETT TITLE: DIRECTOR ADDRESS: 8306 BUCKNELL DR. CITY/ST/ZIP/CO: VIENNA, VA 22180	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: WAYNE EUGENE COMER TITLE: DIRECTOR ADDRESS: 8224 COLBY COURT CITY/ST/ZIP/CO: VIENNA, VA 22180	<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/ WAYNE EUGENECOMER	WAYNE EUGENECOMER,	6/26/2013
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.