

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214515451

1.) CORPORATION NAME:

**GREEN RUN HOMES ASSOCIATION**

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL A INMAN  
INMAN & STRICKLER  
575 LYNNHAVEN PKWY STE 200**

SCC ID NO: **01263953**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**VIRGINIA BEACH, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1248 GREEN GARDEN CIR

CITY/ST/ZIP: VA BEACH, VA 23453

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JILL EWELL		
TITLE:	PRESIDENT		
ADDRESS:	1105 OLDFIELD CIRCLE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23453		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DENNIS HIGGINS		
TITLE:	VICE PRESIDENT		
ADDRESS:	1248 GREEN GARDEN CIRCLE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23453		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PATRICIA KEELEY		
TITLE:	TREASURER		
ADDRESS:	1400 POWDER RIDGE COURT		
CITY/ST/ZIP/CO:	VA BEACH, VA 23453		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAY STERN		
TITLE:	DIRECTOR		
ADDRESS:	3829 FOXGLOVE COURT		
CITY/ST/ZIP/CO:	VA BEACH, VA 23453		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DOROTHY SIMMONS		
TITLE:	SECRETARY		
ADDRESS:	1248 GREEN GARDEN CIRCLE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23453		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	BETH BROOKER		
TITLE:	DIRECTOR		
ADDRESS:	1248 GREEN GARDEN CIRCLE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23453		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROB EWELL DIRECTOR 1248 GREEN GARDEN CIRCLE VIRGINIA BEACH, VA 23453	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMBER MCCULLOCH DIRECTOR 3445 POPPY CRESCENT VA BEACH, VA 23453	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARLENE SMATHERS DIRECTOR 1248 GREEN GARDEN CIRCLE VIRGINIA BEACH, VA 23453	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> 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/ JILL EWELL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JILL EWELL, PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/24/2014 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.			