

1.) CORPORATION NAME:

Roslyn Managers Corporation

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**KATHERINE LAWRENCE
8727 RIVER RD
RICHMOND, VA**

SCC ID NO: **01360791**

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8727 RIVER RD

CITY/ST/ZIP: RICHMOND, VA 23229

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:	MAJOR GENERAL L H GINN III	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9 GLEBE CLOSE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23227		
NAME:	KATHERINE LAWRENCE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	8727 RIVER RD		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	WILLIAM B ARMSTRONG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4009 PARK AVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		
NAME:	THAYER MONTAGUE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8918 NORWICK ROAD		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	FRED MOORE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2100 EAST CARY STREET ROAD SUITE 200		
CITY/ST/ZIP/CO:	RICHMOND, VA 23223		
NAME:	Emily Cherry	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	110 W. Franklin Street		
CITY/ST/ZIP/CO:	Richmond, VA 23220		

NAME: Rich Lundvall TITLE: DIRECTOR ADDRESS: 4103 W. Franklin Street CITY/ST/ZIP/CO: Richmond, VA 23221	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Brent Melton TITLE: DIRECTOR ADDRESS: All Saints Episcopal Church CITY/ST/ZIP/CO: 8787 River Road Richmond, VA 23229	<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/ KATHERINE LAWRENCE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KATHERINE LAWRENCE, SECRETARY PRINTED NAME AND CORPORATE TITLE	12/9/2013 DATE
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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.