

1.) CORPORATION NAME:

MASSANUTTEN PROPERTY OWNERS ASSOCIATION, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

J. JAY LITTEN

410 NEFF AVENUE

HARRISONBURG, VA 22801-3434

DUE DATE: **1/31/2011**

SCC ID NO: **01501378**

5.) STOCK INFORMATION

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

HARRISONBURG CITY (FILED IN ROCKINGHAM COUNTY)

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3980 MASSANUTTEN DR

CITY/ST/ZIP: MASSANUTTEN, VA 22840-

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: BETTY L NEWELL
TITLE: PRESIDENT
ADDRESS: 3142 LANIER LANE
CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840-

OFFICER

DIRECTOR

NAME: EDWARD SHUFF
TITLE: VICE PRESIDENT
ADDRESS: 174 BOONE COURT
CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840-

OFFICER

DIRECTOR

NAME: CLINT ROBERTSON
TITLE: SECRETARY
ADDRESS: 134 PAGE CT
CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840-

OFFICER

DIRECTOR

NAME: THOMAS GALVIN
TITLE: TREASURER
ADDRESS: 247 HOGAN COURT
CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840-

OFFICER

DIRECTOR

NAME: STEVE KOZUP
TITLE: DIRECTOR
ADDRESS: 4608 PALMER ROAD
CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840-

OFFICER

DIRECTOR

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|--|---|
| NAME: JEFF BOLANDER TITLE: DIRECTOR ADDRESS: P O BOX 383 CITY/ST/ZIP/CO: MCGAHEYSVILLE, VA 22840- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: CINDY WHITELOCK TITLE: DIRECTOR ADDRESS: 1359 ISLAND FORD ROAD CITY/ST/ZIP/CO: ELKTON, VA 22827- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MARJORIE KLAWITER TITLE: DIRECTOR ADDRESS: 2777 HOPKINS DRIVE CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: KRISTEN ALLWORTH TITLE: DIRECTOR ADDRESS: 1523 BARKSDALE DRIVE CITY/ST/ZIP/CO: LEESBURG, VA 20176- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JAY HUTCHENS TITLE: DIRECTOR ADDRESS: 355 ALLEGHANY DRIVE CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: DAVID WALTON TITLE: DIRECTOR ADDRESS: 5156 TREVINO DRIVE CITY/ST/ZIP/CO: MASSANUTTEN, VA 22840- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: CANDY MATTHEWS TITLE: DIRECTOR ADDRESS: P O BOX 1227 CITY/ST/ZIP/CO: HARRISONBURG, VA 22801- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: WAYNE SHIPMAN TITLE: DIRECTOR ADDRESS: 1189 RIPPLE COURT CITY/ST/ZIP/CO: FRONT ROYAL, VA 22193- | <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/ BETTY L NEWELL | BETTY L NEWELL, PRESIDENT |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | 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. | |