

1.) CORPORATION NAME:

FOXLEE COMMUNITY CORPORATION

DUE DATE: **11/30/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

OFFICER

JAMES D. SHILKETT

113 MAGNOLIA ROAD

STERLING, VA 20164-5304

SCC ID NO: **01558477**

5.) STOCK INFORMATION

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

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 494

CITY/ST/ZIP: STERLING, VA 20167-0494

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: MARSHA DUCKWITZ
TITLE: PRESIDENT
ADDRESS: 115 MAGNOLIA RD
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

DIRECTOR

NAME: DONNA GRAY
TITLE: VICE PRESIDENT
ADDRESS: 120 MAGNOLIA ROAD
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

DIRECTOR

NAME: JAMES D SHILKETT
TITLE: TREASURER
ADDRESS: 113 MAGNOLIA RD
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

DIRECTOR

NAME: PAULA WILLS
TITLE: ASST TREASURER
ADDRESS: 208 CHESTNUT COURT
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

DIRECTOR

NAME: DEBORAH BURGNER
TITLE: SECRETARY
ADDRESS: 119 MAGNOLIA RD
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

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.

<u>/s/ JAMES D SHILKETT</u>	<u>JAMES D SHILKETT, TREASURER</u>	<u>10/3/2011</u>
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.