

1.) CORPORATION NAME:

GENESIS PROPERTIES, INC.

DUE DATE: **8/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL C HUNT
101 W COMMERCE RD 2ND FL
RICHMOND, VA**

SCC ID NO: **01776145**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 101 W COMMERCE RD 2ND FL

CITY/ST/ZIP: RICHMOND, VA 23224

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:	RHONDA JACOBY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST VP		
ADDRESS:	270 LOGAN ESTATES RUN		
CITY/ST/ZIP/CO:	HENRICO, VA 23233		
NAME:	MICHAEL C HUNT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	8519 HAMPTON VALLEY DRIVE		
CITY/ST/ZIP/CO:	CHESTERFIELD, VA 23832		
NAME:	LAURA HERTZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	506 N 28TH STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23223		
NAME:	RENEE STEVENS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	101 WEST COMMERCE ROAD		
CITY/ST/ZIP/CO:	2ND FLOOR RICHMOND, VA 23224		
NAME:	NICOLE FROST	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9245 IVY BANKS DRIVE		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23116		
NAME:	MARC HIRTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11 S. 12TH STREET		
CITY/ST/ZIP/CO:	SUITE 403 RICHMOND, VA 23219		

NAME: ROBERT D HUNT TITLE: DIRECTOR ADDRESS: 616 HULL STREET APARTMENT 139 CITY/ST/ZIP/CO: RICHMOND, VA 23224	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID HUNT TITLE: DIRECTOR ADDRESS: 207 STONY RIDGE COURT CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23608	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM WOOD TITLE: DIRECTOR ADDRESS: 65 CROSS RIDGE LANE CITY/ST/ZIP/CO: MANAKIN SABOT, VA 23103	<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/ MICHAEL C HUNT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL C HUNT, CEO PRINTED NAME AND CORPORATE TITLE	9/23/2015 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.		