

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213552290

1.) CORPORATION NAME:

**TWIN LAKES OWNERS' ASSOCIATION**

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BARBARA B CAPRON  
THE BALANCING ACT  
3661 STONY POINT RD**

SCC ID NO: **01890995**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**CHARLOTTESVILLE, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ALBEMARLE COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 128

CITY/ST/ZIP: QUINQUE, VA 22965

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: JERRY B A YACUZZI  
 TITLE: PRESIDENT  
 ADDRESS: 102 ZINNIA ROAD  
 CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968

OFFICER       DIRECTOR

NAME: WILLIAM MAXTON  
 TITLE: VICE PRESIDENT  
 ADDRESS: 80 LARKSPUR ROAD  
 CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968

OFFICER       DIRECTOR

NAME: SUE LANCE  
 TITLE: TREASURER  
 ADDRESS: 736 GERANIUM ROAD  
 CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968

OFFICER       DIRECTOR

NAME: ANITA JWANOUSKOS  
 TITLE: SECRETARY  
 ADDRESS: 122 CARNATION ROAD  
 CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968

OFFICER       DIRECTOR

NAME: BARBARA CAPRON  
 TITLE: DIRECTOR  
 ADDRESS: 3661 STONY POINT ROAD  
 CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22911

OFFICER       DIRECTOR

NAME: JAMES HAYSLETT  
 TITLE: DIRECTOR  
 ADDRESS: 621 JONQUIL ROAD  
 CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968

OFFICER       DIRECTOR

NAME: PATRICK MOCTEZUMA TITLE: DIRECTOR ADDRESS: 155 E. DAFFODIL ROAD CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: CARL SHIFFLETT TITLE: DIRECTOR ADDRESS: 52 MORNING GLORY ROAD CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JEAN WEEKS TITLE: DIRECTOR ADDRESS: 205 WOODBROOK DRIVE CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22901	<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/ JERRY B A YACUZZI	JERRY B A YACUZZI, PRESIDENT	10/31/2013
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.		