

| | | | |
|---|--|-------|------------|
| 1.) CORPORATION NAME: PROVIDENCE COURT TOWNHOUSE ASSOCIATION, INC. | DUE DATE: 9/30/2014 | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ASSOCIATION COMMUNITY SERVICES WEST INC 1904 BYRD AVE STE 124 RICHMOND, VA | SCC ID NO: 02222040 | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY | 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> | CLASS | AUTHORIZED |
| CLASS | AUTHORIZED | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: VA | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O ACS WEST INC
1904 BYRD AVENUE SUITE 100

CITY/ST/ZIP: RICHMOND, VA 23230

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: PATRICIA FITZ TITLE: PRESIDENT ADDRESS: 7962 CLOVERTREE CT CITY/ST/ZIP/CO: RICHMOND, VA 23235 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|--|---|--|--|

| | | | |
|---|---|--|--|
| NAME: CATHY CHILDRRESS TITLE: TREASURER ADDRESS: 11216 WOODSTOCK HEIGHTS DR CITY/ST/ZIP/CO: RICHMOND, VA 23059 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|---|--|--|

| | | | |
|---|---|--|--|
| NAME: TRACY AVERY GETER TITLE: SECRETARY ADDRESS: 8120 CLOVERTREE COURT CITY/ST/ZIP/CO: RICHMOND, VA 23235 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|---|--|--|

| | | | |
|---|----------------------------------|--|--|
| NAME: DEBRA FARMER TITLE: DIRECTOR ADDRESS: 8100 CLOVERTREE COURT CITY/ST/ZIP/CO: RICHMOND, VA 23235 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | |
|---|----------------------------------|--|--|

| | | | |
|---|----------------------------------|--|--|
| NAME: STANLEY TAYLOR TITLE: DIRECTOR ADDRESS: 8024 CLOVERTREE COURT CITY/ST/ZIP/CO: RICHMOND, VA 23235 | <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/ PATRICIA FITZ | PATRICIA FITZ, PRESIDENT | 8/28/2014 |
| 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.