

1.) CORPORATION NAME:

**ASCOT HOMEOWNERS ASSOCIATION, INC.**

DUE DATE: **8/31/2010**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
WILLIAM F KELLEY  
11022 BURYWOOD LANE  
RESTON, VA 20194**

SCC ID NO: **02331007**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 934

CITY/ST/ZIP: GREAT FALLS, VA 22066-

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: DANIELLE MILSAN  
TITLE: SECRETARY  
ADDRESS: 1223 BISHOPSGATE WAY  
CITY/ST/ZIP/CO: RESTON, VA 20194-

OFFICER

DIRECTOR

NAME: JOE KOENIG  
TITLE: DIRECTOR  
ADDRESS: 1230 BISHOPSGATE WAY  
CITY/ST/ZIP/CO: RESTON, VA 20194-

OFFICER

DIRECTOR

NAME: MOLLY BARRIE  
TITLE: PRESIDENT  
ADDRESS: 1205 BISHOPSGATE WAY  
CITY/ST/ZIP/CO: RESTON, VA 20194-

OFFICER

DIRECTOR

NAME: WILLIAM KELLEY  
TITLE: TREASURER  
ADDRESS: 11022 BURYWOOD LANE  
CITY/ST/ZIP/CO: RESTON, VA 20194-

OFFICER

DIRECTOR

NAME: TRACEY SZAJGIN  
TITLE: DIRECTOR  
ADDRESS: 1215 BISHOPSGATE WAY  
CITY/ST/ZIP/CO: RESTON, VA 20194-

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/ WILLIAM KELLEY</u>	<u>WILLIAM KELLEY, TREASURER</u>	<u>4/23/2011</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.