

1.) CORPORATION NAME:

**Hampton Roads Community Housing Resources
Board, Incorporated**

DUE DATE: **11/30/2013**

SCC ID NO: **02355543**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**SYLVIA E HILLS
DEPT OF HOUSING & NEIGHBORHOOD PRESERVATION
CITY OF VA BEACH MUNICIPAL CTR BLDG 18A**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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VIRGINIA BEACH, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: CITY OF NEWPORT NEWS DEVELOPMENT DEPT
2400 WASHINGTON ST

CITY/ST/ZIP: NEWPORT NEWS, VA 23607-4301

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:	SYLVIA HILL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	DHNP-ANX, BLDG 1-BASEMT 2401 COURTHOUSE DR VIRGINIA BEACH, VA 23456-9083		
CITY/ST/ZIP/CO:			

NAME:	TRICIA WILSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2400 WASHINGTON AVE NEWPORT NEWS, VA 23607		
CITY/ST/ZIP/CO:			

NAME:	LYSANDRA SHAW	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	PO BOX 1858 SUFFOLK, VA 23439		
CITY/ST/ZIP/CO:			

NAME:	ANGELIQUE LENOIR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	22 LINCOLN ST HAMPTON, VA 23669		
CITY/ST/ZIP/CO:			

NAME:	AUTHURINE B PEACOCK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1468 S MILITARY HIGHWAY CHESAPEAKE, VA 23320		
CITY/ST/ZIP/CO:			

NAME: Sybil Bullock TITLE: VICE PRESIDENT ADDRESS: Suffolk Redevelopment & Housing Authority 530 E. Pinner Street CITY/ST/ZIP/CO: Suffolk, VA 23510	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Cashawn Easter TITLE: SECRETARY ADDRESS: Portsmouth Redevelopment & Housing Authority 3116 South St CITY/ST/ZIP/CO: Portsmouth, VA 23705	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ LYSANDRA SHAW	LYSANDRA SHAW, TREASURER	11/22/2013
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.