

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215518015
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1.) CORPORATION NAME: VIRGINIA COACH CO. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: RICHARD A DEZIO 218 N LEE ST STE 200 ALEXANDRIA, VA 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALEXANDRIA CITY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 5/31/2015 SCC ID NO: 02424471 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> <tr> <td>COMA</td> <td>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMA	5,000
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COMA	5,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 883

CITY/ST/ZIP: PURCELLVILLE, VA 20134

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.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: BETTY JO COUNSELMAN		
TITLE: P/T		
ADDRESS: 14570 PURCELLVILLE RD.		
CITY/ST/ZIP/CO: PURCELLVILLE, VA 20132		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DEBRA K OWINGS		
TITLE: VP/S		
ADDRESS: 14556 PURCELLVILLE ROAD		
CITY/ST/ZIP/CO: PURCELLVILLE, VA 20132		

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/ DEBRA K OWINGS	DEBRA K OWINGS, VP/S	5/7/2015
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.