

1.) CORPORATION NAME:

The Richmond Symphony Orchestra League, Inc.

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ALLEN C GOOLSBY
HUNTON & WILLIAMS
951 E BYRD ST RIVERFRONT PLZ E TWR**

SCC ID NO: **02471043**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 11705

CITY/ST/ZIP: RICHMOND, VA 23230-0105

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: JAN CARLTON TITLE: MEMBER VP ADDRESS: 12066 FOXFIELD CIRCLE CITY/ST/ZIP/CO: RICHMOND, VA 23233	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARY "LUDI" WEBBER TITLE: PRESIDENT ADDRESS: 5625 PROMONTORY POINTE RD CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23112-2023	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SUSAN S WILLIAMS TITLE: PRES-ELECT ADDRESS: 3004 RIVER HILLS CT CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN KING TITLE: VP-EDUCATION ADDRESS: 3817 HAWTHORNE AVE CITY/ST/ZIP/CO: RICHMOND, VA 23222	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: HELEN WINN TITLE: VP-HOSPITALITY ADDRESS: 2956 HATHAWAY RD #512 CITY/ST/ZIP/CO: R, VA 23225	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SALLIE-RIVES MCCREA TITLE: VP-WAYS & MEANS ADDRESS: 1941 CASTLEBRIDGE RD CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID H BERRY TREASURER 3025 GROVE AVE RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROL SESNOWITZ SECY CORRESPOND 400 BONRUTH PL HENRICO, VA 23238	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PEGGY BOYD SECRETARY 1606 HEATHGLOW LN RICHMOND, VA 23238	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN CATLETT DIRECTOR 2506 CHIMNEY HOUSE PL MIDLOTHIAN, VA 23112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HUGH CATLETT FINANCE, CFO 2506 CHIMNEY HOUSE PL MIDLOTHIAN, VA 23112	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW WILLIAMS ASST TREASURER 3606 NUTTREE WOODS DR MIDLOTHIAN, VA 23112	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FAYE W HOLLAND DIRECTOR 11914 W BRIARPATCH DR MIDLOTHIAN, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHY CATLETT DIRECTOR 2525 KROSSRIDGE RD N CHESTERFIELD, VA 23236	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOYCE MAINES DIRECTOR 1115 LAKELAND CIR RICHMOND, VA 23229	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LINDA M BOURGEOIS DIRECTOR 807 ARLINGTON CIR RICHMOND, VA 23229	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KRISTINE VON RUFFER DIRECTOR 13906 DUNKELD TERR MIDLOTHIAN, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: WENDY SYDNOR TITLE: DIRECTOR ADDRESS: 8232 HALSTEAD RD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANN BURKS TITLE: DIRECTOR ADDRESS: 3456 RIVANNA DR 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/ DAVID HBERRY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID HBERRY, PRINTED NAME AND CORPORATE TITLE	9/27/2013 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.		