

1.) CORPORATION NAME: AFTON GLEN HOMEOWNERS ASSOCIATION	DUE DATE: 10/31/2014
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JONATHAN C KINNEY 2300 WILSON BLVD 7TH FL ARLINGTON, VA	SCC ID NO: 02477172
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ARLINGTON COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 6700 NORVIEW COURT CITY/ST/ZIP: SPRINGFIELD, VA 22152	
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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: JANE E DAVIES TITLE: PRESIDENT ADDRESS: 8629 GROVELAND DRIVE CITY/ST/ZIP/CO: SPRINGFIELD, VA 22153	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: DAN SIGG TITLE: VICE PRESIDENT ADDRESS: 7723 SILVER SAGE CT CITY/ST/ZIP/CO: SPRINGFIELD, VA 22153	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: CAROLYN ENG TITLE: TREASURER ADDRESS: 7724 GREEN GARLAND DRIVE CITY/ST/ZIP/CO: SPRINGFIELD, VA 22153	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: CAROL WARD TITLE: SECRETARY ADDRESS: 7681 GREEN GARLAND DR. CITY/ST/ZIP/CO: SPRINGFIELD, VA 22153	<input checked="" 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/ JANE E DAVIES	JANE E DAVIES, PRESIDENT	10/23/2014
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.