

1.) CORPORATION NAME:

**KANAWHA TRACE OWNERS ASSOCIATION**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**THOMAS C FOSTER  
1111 E MAIN ST STE 1500  
RICHMOND, VA 23219**

SCC ID NO: **02850469**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9 JAMES FALLS DRIVE

CITY/ST/ZIP: RICHMOND, VA 23221

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: THOMAS FOSTER TITLE: PRESIDENT ADDRESS: 13 JAMES FALLS DRIVE CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LAURA VAN MANEN TITLE: VICE PRESIDENT ADDRESS: 10 TOW PATH LANE SOUTH CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANN DANNHAUSEN TITLE: SECRETARY ADDRESS: 17 JAMES FALLS DRIVE CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KAREN DAUGHTREY TITLE: TREASURER ADDRESS: 25 JAMES FALLS DRIVE CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOE KENT TITLE: ASST TREASURER ADDRESS: 5 TOW PATH CIRCLE CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LINDA WALTER TITLE: ASST SECRETARY ADDRESS: 33 JAMES FALL DRIVE CITY/ST/ZIP/CO: RICHMOND, VA 23221	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN PAAVOLA DIRECTOR 15 OLD CANAL ROAD RICHMOND, VA 23221	<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/ THOMAS FOSTER	THOMAS FOSTER, PRESIDENT	3/15/2013	
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.			