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| 1.) CORPORATION NAME:<br><b>WESTOVER HILLS NEIGHBORHOOD ASSOCIATION INCORPORATED</b>                           | DUE DATE: <b>4/30/2013</b><br><br>SCC ID NO: <b>02857654</b>   |       |            |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>WADE THRIFT<br/>4903 NEW KENT ROAD<br/>RICHMOND, VA</b> | 5.) STOCK INFORMATION<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> | CLASS | AUTHORIZED |
| CLASS  | AUTHORIZED   |       |            |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>RICHMOND CITY</b>  |  |       |            |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>  |  |       |            |

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| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: POB 13421<br><br>CITY/ST/ZIP: RICHMOND, VA 23225 |  |
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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.

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|---|---|--|--|
| NAME: Rich Meagher<br>TITLE: PRESIDENT<br>ADDRESS: 5208 Devonshire Road<br>CITY/ST/ZIP/CO: RICHMOND, VA 23225 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|--|---|--|--|
| NAME: WADE THRIFT<br>TITLE: PRESIDENT<br>ADDRESS: 4903 NEW KENT ROAD<br>CITY/ST/ZIP/CO: RICHMOND, VA 23225 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|--|---|--|--|
| NAME: MELISSA BUTLER<br>TITLE: TREASURER<br>ADDRESS: 5110 CALEDONIA ROAD<br>CITY/ST/ZIP/CO: RICHMOND, VA 23225 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|--|---|--|--|
| NAME: Jenny Ballard<br>TITLE: SECRETARY<br>ADDRESS: 5204 New Kent Road<br>CITY/ST/ZIP/CO: RICHMOND, VA 23225 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |  |
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|---|---|-----------------------------------|--|
| NAME: Rick Pearman<br>TITLE: VICE PRESIDENT<br>ADDRESS: 5204 New Kent Road<br>CITY/ST/ZIP/CO: Riachmond, VA 23225 | <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/ MELISSA BUTLER                                  | MELISSA BUTLER, TREASURER        | 4/17/2013 |
| 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.