

1.) CORPORATION NAME: **SAILOR'S REST SUBDIVISION HOMEOWNERS ASSOCIATION, INCORPORATED** DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **STEPHANIE LACEY** SCC ID NO: **03010642**

**98 ADMIRAL DR
BUMPASS, VA**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION: **VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 98 ADMIRAL DR
 CITY/ST/ZIP: BUMPASS, VA 23024

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:	KIPLING CARPENTER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2445 EAST HAM RD		
CITY/ST/ZIP/CO:	BUMPASS, VA 23024		

NAME:	STEPHANIE LACEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	98 ADMIRAL DR		
CITY/ST/ZIP/CO:	BUMPASS, VA 23004		

NAME:	MITCHELL DEANE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SGT AT ARMS		
ADDRESS:	2477 EASTHAM RD.		
CITY/ST/ZIP/CO:	BUMPASS, VA 23024		

NAME:	JANICE ROGERS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	109 PLEASANTS VIEW PT		
CITY/ST/ZIP/CO:	BUMPASS, VA 23024		

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/ STEPHANIE LACEY	STEPHANIE LACEY, TREASURER	4/6/2014
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.