

1.) CORPORATION NAME:

DUE DATE: **6/30/2013**

Villages of Kiln Creek Owners Association

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **03224847**

**ELIZABETH L WHITE
LECLAIRRYAN A PROFESSIONAL CORPORATION
5388 DISCOVERY PARK BLVD 3RD FL**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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WILLIAMSBURG, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

JAMES CITY COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1405-C KILN CREEK PKWY

CITY/ST/ZIP: NEWPORT NEWS, VA 23602

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:	DAVID RADCLIFFE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	125 E WEDGEWOOD DR		
CITY/ST/ZIP/CO:	YORKTOWN, VA 23693		

NAME:	MEGEN MCMICHAEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	405 LEXINGTON CT.		
CITY/ST/ZIP/CO:	YORKTOWN, VA 23693		

NAME:	JOHN MEYER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	806 WYEMOUTH DRIVE		
CITY/ST/ZIP/CO:	NEWPORT NEWS, VA 23602		

NAME:	CHARLES NOLL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	133 TRADEWINDS DRIVE		
CITY/ST/ZIP/CO:	YORKTOWN, VA 23693		

NAME:	CHERYL MOULTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	123 TRADEWINDS DRIVE		
CITY/ST/ZIP/CO:	YORKTOWN, VA 23693		

NAME:	JIM PADDLEFORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	922 HOLBROOK DRIVE		
CITY/ST/ZIP/CO:	NEWPORT NEWS, VA 23602		

NAME: JEFFREY VERRY TITLE: DIRECTOR ADDRESS: 104 ROYAL COLVEN CT CITY/ST/ZIP/CO: YORKTOWN, VA 23693	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES STEARNS TITLE: DIRECTOR ADDRESS: 134 SPOON COURT CITY/ST/ZIP/CO: YORKTOWN, VA 23693	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BILL HARRIS TITLE: DIRECTOR ADDRESS: 209 ROCK CREEK CT CITY/ST/ZIP/CO: YORKTOWN, VA 23693	<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 RADCLIFFE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID RADCLIFFE, PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/14/2014 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.		