

1.) CORPORATION NAME:

**PHILOMONT COMMUNITY CENTER ADVISORY BOARD,
INC.**

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

SCC ID NO: **03233178**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DEBBIE LUDTKE
PHILOMONT COMMUNITY CENTER
36592 JEB STUART RD / PO BOX 268**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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PHILOMONT, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 268

CITY/ST/ZIP: PHILOMONT, VA 20131

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:	VICTORIA ATHERTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CO-PRESIDENT		
ADDRESS:	20652 ST. LOUIS RD		
CITY/ST/ZIP/CO:	PURCELLVILLE, VA 20132		

NAME:	NATASHA VEITCH JANKOWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CO-PRESIDENT		
ADDRESS:	36981 ELAINE PL		
CITY/ST/ZIP/CO:	PURCELLVILLE, VA 20132		

NAME:	DEBBIE LUDTKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	PO BOX 268		
CITY/ST/ZIP/CO:	PHILOMONT, VA 20131		

NAME:	MEREDITH M GURDACK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	PO BOX 271		
CITY/ST/ZIP/CO:	PHILOMONT, VA 20131		

NAME:	DEBBIE LUDTKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 268		
CITY/ST/ZIP/CO:	PHILOMONT, VA 20131		

NAME:	Rachel Haws	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	19804 Colchester Rd		
CITY/ST/ZIP/CO:	Purcellville, VA 20132		

NAME: Robin Benatti TITLE: PRESIDENT ADDRESS: 20365 Cockerill Rd CITY/ST/ZIP/CO: Purcellville, VA 20132	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Anna Lane TITLE: SECRETARY ADDRESS: PO Box 204 CITY/ST/ZIP/CO: Philomont, VA 20131	<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/ MEREDITH M GURDACK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MEREDITH M GURDACK, TREASURER PRINTED NAME AND CORPORATE TITLE	10/31/2013 DATE
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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.