

1.) CORPORATION NAME:

Greater Oxford Civic Association

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**THURMAN S. CASH III
8359 CHEROKEE ROAD
RICHMOND, VA 23235**

SCC ID NO: **03258951**

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: 8359 CHEROKEE ROAD

CITY/ST/ZIP: RICHMOND, VA 23235

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: THURMAN S. CASH III TITLE: PRESIDENT ADDRESS: 8359 CHEROKEE RD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID TESTRAKE TITLE: VICE PRESIDENT ADDRESS: 8643 TRABUE ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NANCY MILLER TITLE: SECRETARY ADDRESS: 3700 WHITEWOOD ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RUBY ROBINSON TITLE: TREASURER ADDRESS: 3111 ARCHDALE ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23235-2509	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DIANE BACON TITLE: DIRECTOR ADDRESS: 8117 LETHBRIDGE ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALISON BERRY TITLE: DIRECTOR ADDRESS: 3619 WHITEWOOD ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EILEEN S. COCHRAN DIRECTOR 4212 ARROWHEAD ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERRY COX DIRECTOR 3110 ARCHDALE ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WAYNE GAUTHIER DIRECTOR 3030 SCHERER DRIVE RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EVELYN KLUMB DIRECTOR 3001 E. WEYBURN ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAMILLE LACOGNATA DIRECTOR 5500 WOODBURN COURT RICHMOND, VA 23225	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL MARTIN DIRECTOR 3266 SHERBROOK ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JERRY MILLER DIRECTOR 3020 DARNLEY DRIVE RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	COURTNEY Y. TKACZ DIRECTOR 3705 WHITEWOOD ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EMMANUEL WRIGHT DIRECTOR 2900 BICKNELL ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CATHY EDWARDS DIRECTOR 8313 CHARLISE ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN GRAY DIRECTOR 3001 ARCHDALE ROAD RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: PATRICIA JARRELL OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 8265 HALSTEAD ROAD
CITY/ST/ZIP/CO: RICHMOND, VA 23235

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.

<u>/s/ THURMAN S. CASH III</u>	<u>THURMAN S. CASH III,</u>	<u>7/23/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.