

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214504635

1.) CORPORATION NAME:

RIDINGS OF MCLEAN HOMEOWNERS ASSOCIATION, INC.

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JAMES WATT
1009 EATON DR
MCLEAN, VA**

SCC ID NO: **03349065**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1008 EATON DRIVE

CITY/ST/ZIP: MCLEAN, VA 22102

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.

| | | | | | |
|-----------------|------------------|-------------------------------------|---------|-------------------------------------|----------|
| | | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | GARETH M BARBOSA | | | | |
| TITLE: | PRESIDENT | | | | |
| ADDRESS: | 1009 EATON DRIVE | | | | |
| CITY/ST/ZIP/CO: | MCLEAN, VA 22102 | | | | |

| | | | | | |
|-----------------|-------------------|-------------------------------------|---------|-------------------------------------|----------|
| | | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | CARLTON ARRENDELL | | | | |
| TITLE: | VICE PRESIDENT | | | | |
| ADDRESS: | 1007 EATON DR | | | | |
| CITY/ST/ZIP/CO: | MCLEAN, VA 22102 | | | | |

| | | | | | |
|-----------------|------------------|--------------------------|---------|-------------------------------------|----------|
| | | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: | TAMARA LANE | | | | |
| TITLE: | DIRECTOR | | | | |
| ADDRESS: | 1010 EATON DR | | | | |
| CITY/ST/ZIP/CO: | MCLEAN, VA 22102 | | | | |

| | | | | | |
|-----------------|------------------|-------------------------------------|---------|--------------------------|----------|
| | | <input checked="" type="checkbox"/> | OFFICER | <input type="checkbox"/> | DIRECTOR |
| NAME: | MARY J BARBOSA | | | | |
| TITLE: | TREASURER | | | | |
| ADDRESS: | 1008 EATON DR | | | | |
| CITY/ST/ZIP/CO: | MCLEAN, VA 22102 | | | | |

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/ GARETH M BARBOSA | GARETH M BARBOSA, | 1/20/2014 |
| 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.