

<b>SCC eFile</b>	<b>2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	215524864		
1.) CORPORATION NAME: <b>EMERALD RIDGE HOMEOWNERS ASSOCIATION, INC.</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>TIM F. JOST TOLSON          6675 HIGHLANDER WAY          CROZET, VA</b>		DUE DATE: <b>6/30/2015</b>  SCC ID NO: <b>03431624</b>  5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED			
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ALBEMARLE COUNTY</b>				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>				
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: PO BOX 212  CITY/ST/ZIP: CROZET, VA 22932				
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: TIM TOLSON TITLE: PRESIDENT ADDRESS: 6675 HIGHLANDER WAY CITY/ST/ZIP/CO: CROZET, VA 22932	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: ROBIN ATWOOD TITLE: TREASURER ADDRESS: 1955 SADDLEBACK DRIVE CITY/ST/ZIP/CO: CROZET, VA 22932	<input checked="" 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/ TIM TOLSON	TIM TOLSON, PRESIDENT	6/30/2015		
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.				