

1.) CORPORATION NAME:

**VIRGINIA BEACH POLICE SUPERVISORS'
ASSOCIATION,INC.**

DUE DATE: **7/31/2015**

SCC ID NO: **03443405**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL A ROBUSTO
2476 NIMMO PKWY
SUITE 121**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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VIRGINIA BEACH, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1621 DONNA DR STE 3

CITY/ST/ZIP: VA BEACH, VA 23451

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:	CHARLES J. CONDON	
TITLE:	PRESIDENT	
ADDRESS:	1965 COUNTRY MANOR LANE	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23456	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DOUGLAS GUEVARA	
TITLE:	SECRETARY	
ADDRESS:	2685 LEVEL LOOP ROAD	
CITY/ST/ZIP/CO:	VA BEACH, VA 23456	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PATRICK GOUGH,SR	
TITLE:	RETIREE REP.	
ADDRESS:	2831 MAJESTIC OAK COURT	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23456	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JAMES WALTERS	
TITLE:	EXEC AIDE	
ADDRESS:	932 DUKE OF SUFFOLK DR	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23454	

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/ CHARLES J. CONDON</u>	<u>CHARLES J. CONDON,</u>	<u>8/30/2015</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.