

1.) CORPORATION NAME:

**COLONIAL CAPITAL WILLIAMSBURG KIWANIS
FOUNDATION**

DUE DATE: **3/31/2013**

SCC ID NO: **04058913**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ROBERT ZOGLMAN
120 WESTBURY
WILLIAMSBURG, VA 23188**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

JAMES CITY COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 612

CITY/ST/ZIP: WILLIAMSBURG, VA 23187-0612

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:	CHRIS SNYDER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1657 RIVER RIDGE		
CITY/ST/ZIP/CO:	WILLIAMSBURG, VA 23185		

NAME:	PAM RAMBO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT ELECT		
ADDRESS:	3101 PARKSIDE LANE		
CITY/ST/ZIP/CO:	WILLIAMSBURG, VA 23185		

NAME:	PETER WEBSTER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TRE-FOUNDATION		
ADDRESS:	219 WATERTON		
CITY/ST/ZIP/CO:	WILLIAMSBURG, VA 23188		

NAME:	ROBERT ZOGLMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	120 WESTBURY		
CITY/ST/ZIP/CO:	WILLIAMSBURG, VA 23188		

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/ PETER WEBSTER</u>	<u>PETER WEBSTER, TRE- FOUNDATION</u>	<u>1/20/2013</u>
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.