

1.) CORPORATION NAME:

SMITH ATHLETIC ASSOCIATION

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LEIGH ANN COVERSTONE
12830 CONE LANE
MIDLOTHIAN, VA**

SCC ID NO: **04142709**

5.) STOCK INFORMATION

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

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 2157

CITY/ST/ZIP: MIDLOTHIAN, VA 23112

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:	John Benesek	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	Midlothian, VA 23112		
NAME:	Sherri Jimenez	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	midlothian, VA 23112		
NAME:	Eric Payne	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	midlothian, VA 23112		
NAME:	Carrie Payne	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	Midlothian, VA 23112		
NAME:	Jenni Waldrop	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	midlothian, VA 23112		
NAME:	Ed Stoots	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 2157		
CITY/ST/ZIP/CO:	midlothian, VA 23112		

NAME: Kellie Fisher TITLE: DIRECTOR ADDRESS: P.O. Box 2157 CITY/ST/ZIP/CO: midlothian, VA 23112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Sonia Austin TITLE: DIRECTOR ADDRESS: P.O. Box 2157 CITY/ST/ZIP/CO: Midlothian, VA 23112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Annmarie Schultz TITLE: Webmaster ADDRESS: P.O. Box 2157 CITY/ST/ZIP/CO: midlothian, VA 23112	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Kelly Chin TITLE: Membership ADDRESS: P.O. Box 2157 CITY/ST/ZIP/CO: Midlothian, VA 23112	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Diana Hall TITLE: Ways and Means ADDRESS: P.O. Box 2157 CITY/ST/ZIP/CO: Midlothian, VA 23112	<input checked="" type="checkbox"/> OFFICER	<input 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/ Sherri Jimenez SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Sherri Jimenez, TREASURER PRINTED NAME AND CORPORATE TITLE	10/14/2013 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.		