

1.) CORPORATION NAME: **AMAZEMENT SQUARE** DUE DATE: **10/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **MORT SAJADIAN PHD
27 NINTH ST
LYNCHBURG, VA** SCC ID NO: **04168738**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 27 NINTH ST
 CITY/ST/ZIP: LYNCHBURG, VA 24504

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:	THOMAS W. PETTYJOHN, JR.	
TITLE:	TREASURER	
ADDRESS:	810 MAIN STREET	
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24504	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	FRANCES GILES	
TITLE:	SECRETARY	
ADDRESS:	3852 PEAKLAND PLACE	
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24503	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	HYLAN HUBBARD, III	
TITLE:	CHAIRMAN	
ADDRESS:	5456 COTTONTOWN ROAD	
CITY/ST/ZIP/CO:	FOREST, VA 24551	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DIANE WALKER	
TITLE:	DIRECTOR	
ADDRESS:	1409 INDERED FARM RD	
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24503	

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/ THOMAS W. PETTYJOHN, JR.	THOMAS W. PETTYJOHN, JR.,	10/22/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER 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.