

1.) CORPORATION NAME:

**THE SUMMIT AT MASSANUTTEN OWNERS ASSOCIATION**

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CLARK & BRADSHAW PC  
92 N LIBERTY ST  
HARRISONBURG, VA**

SCC ID NO: **04337499**

5.) STOCK INFORMATION

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

**HARRISONBURG CITY (FILED IN ROCKINGHAM COUNTY)**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2000 KILLY CT  
ADMINISTRATIVE OFFICE

CITY/ST/ZIP: MASSANUTTEN, VA 22840

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:	CANDACE J MATTHEWS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2000 KILLY CT		
CITY/ST/ZIP/CO:	MASSANUTTEN, VA 22840		
NAME:	M A KOEBIG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1296 RESORT DRIVE		
CITY/ST/ZIP/CO:	MASSANUTTEN, VA 22840		
NAME:	THOMAS THOMPSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	161 HOTEL DRIVE		
CITY/ST/ZIP/CO:	MASSANUTTEN, VA 22840		
NAME:	TAMMI SILVER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4047C MASSANUTTEN DRIVE		
CITY/ST/ZIP/CO:	MASSANUTTEN, VA 22840		
NAME:	MICHAEL L SHIFLET	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 1227		
CITY/ST/ZIP/CO:	HARRISONBURG, VA 22803		
NAME:	THOMAS C. WATERBURY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	610 WEST RIO RD.		
CITY/ST/ZIP/CO:	Charlottesville, VA 22901		

NAME: GARRETT M. SMITH TITLE: ASST. SEC./GC ADDRESS: 610 WEST RIO RD. CITY/ST/ZIP/CO: Charlottesville, VA 22901	<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/ GARRETT M.SMITH SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GARRETT M.SMITH, PRINTED NAME AND CORPORATE TITLE	9/23/2013 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.		