

1.) CORPORATION NAME: <b>THE GROVES HOMEOWNER'S ASSOCIATION, INC.</b>	DUE DATE: <b>3/31/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>DAVID C HELSCHER 3140 CHAPARRAL DR STE 200-C ROANOKE, VA</b>	SCC ID NO: <b>04444329</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ROANOKE COUNTY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2754 ELECTRIC RD  
STE D

CITY/ST/ZIP: ROANOKE, VA 24018

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: HOWARD MOWLES	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: 6526 BROOKHAVEN COURT				
CITY/ST/ZIP/CO: ROANOKE, VA 24018				

NAME: TONDA FUGATE	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: VICE PRESIDENT				
ADDRESS: 6525 MONET DRIVE				
CITY/ST/ZIP/CO: ROANOKE, VA 24018				

NAME: PATTI DICKERSON	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 6521 MONET DRIVE				
CITY/ST/ZIP/CO: ROANOKE, VA 24018				

NAME: FRANK CUPP	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 6206 SEDGEWICK DRIVE				
CITY/ST/ZIP/CO: ROANOKE, VA 24018				

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/ PATTI DICKERSON	PATTI DICKERSON, SECRETARY	3/10/2014
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.