

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213565315

1.) CORPORATION NAME:

**TRALEE ESTATES HOMEOWNERS ASSOCIATION**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL FISCHER  
11552 TRALEE DR  
GREAT FALLS, VA**

SCC ID NO: **04713145**

5.) STOCK INFORMATION

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

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11552 TRALEE DRIVE

CITY/ST/ZIP: GREAT FALLS, VA 22066

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:	Kathi Dills	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	11548 TRALEE DR		
CITY/ST/ZIP/CO:	GREAT FALLS, VA 22066		

NAME:	SHANKAR IYER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	11541 TRALEE DRIVE		
CITY/ST/ZIP/CO:	GREAT FALLS, VA 22066		

NAME:	Lourdes Ruskavich	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	11533 TRALEE DRIVE		
CITY/ST/ZIP/CO:	GREAT FALLS, VA 22066		

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/ Lourdes Ruskavich	Lourdes Ruskavich, SECRETARY	2/25/2014
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.