

1.) CORPORATION NAME:

**VIRGINIA PUBLIC ACCESS PROJECT, INC.**

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DAVID M POOLE  
110 N MULBERRY ST  
RICHMOND, VA 23220**

SCC ID NO: **04808879**

5.) STOCK INFORMATION

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

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 7356

CITY/ST/ZIP: RICHMOND, VA 23221

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: JEFF MERRIMAN TITLE: CHAIRMAN ADDRESS: 3741 HEVERLEY DR CITY/ST/ZIP/CO: GLEN ALLEN, VA 23059	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PAUL LIBERTY TITLE: DIRECTOR ADDRESS: 6004 MERRYVALE CT CITY/ST/ZIP/CO: SPRINGFIELD, VA 22152	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CAL WHITEHEAD TITLE: DIRECTOR ADDRESS: 28 N 8TH ST FL 2 CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID FOSTER TITLE: DIRECTOR ADDRESS: 2607 N WAKEFIELD ST CITY/ST/ZIP/CO: ARLINGTON, VA 22207	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROLAND GUNN TITLE: DIRECTOR ADDRESS: 12500 FAIR LAKES CIR, STE 400 CITY/ST/ZIP/CO: FAIRFAX, VA 22033	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CONAWAY HAWKINS TITLE: DIRECTOR ADDRESS: 9012 SPYGLASS HILL TURN CITY/ST/ZIP/CO: CHESTERFIELD, VA 23832	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: MARTIN JOHNSON TITLE: DIRECTOR ADDRESS: 823 E. MAIN STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVE NASH TITLE: DIRECTOR ADDRESS: 9108 WINDOVER CT CITY/ST/ZIP/CO: HENRICO, VA 23229	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALBERT POLLARD JR. TITLE: V Chair/Sec ADDRESS: PO BOX 508 CITY/ST/ZIP/CO: LIVELY, VA 22507	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAY SMITH TITLE: DIRECTOR ADDRESS: 50 PEAR ST CITY/ST/ZIP/CO: RICHMOND, VA 23223	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: William E. Wilson TITLE: TREASURER ADDRESS: 9017 Waldelock Place CITY/ST/ZIP/CO: Mechanicsville, VA 23116	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Ann Rust TITLE: DIRECTOR ADDRESS: 1020 Monroe Street CITY/ST/ZIP/CO: Herndon, VA 20170	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Nicole Riley TITLE: DIRECTOR ADDRESS: 919 East Main Street Suite 1160 CITY/ST/ZIP/CO: Richmond, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: William H. Fralin, Jr. TITLE: DIRECTOR ADDRESS: 2830 Wilton Road SW CITY/ST/ZIP/CO: Norfolk, VA 24014	<input type="checkbox"/> OFFICER	<input checked="" 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/ JEFF MERRIMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JEFF MERRIMAN, CHAIRMAN PRINTED NAME AND CORPORATE TITLE	2/20/2013 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.		