

1.) CORPORATION NAME:

TWIN HARBORS HOMEOWNERS ASSOCIATION

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**W LESLIE KILDUFF JR
PO BOX 1801
KILMARNOCK, VA**

SCC ID NO: **04823597**

5.) STOCK INFORMATION

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

NORTHUMBERLAND COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 450

CITY/ST/ZIP: REEDVILLE, VA 22539

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:	JAMES H BRITTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	664 TWIN HARBOR ROAD		
CITY/ST/ZIP/CO:	REEDVILLE, VA 22539		
NAME:	JUDY ROSSI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	488 TWIN HARBOR ROAD		
CITY/ST/ZIP/CO:	REEDVILLE, VA 22539		
NAME:	WILLIAM JOHNSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	418 WHIPPORWILL CT		
CITY/ST/ZIP/CO:	COLONIAL HEIGHTS, VA 23834		
NAME:	Cheryl Naulty	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9112 Hunting Horn Lane		
CITY/ST/ZIP/CO:	Potomac, MD 20854		
NAME:	Ellen Hollows	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	153 Watermans Way		
CITY/ST/ZIP/CO:	Reedville, VA 22539		
NAME:	Charles Gilmer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	152 Watermans Way		
CITY/ST/ZIP/CO:	Reedville, VA 22539		

NAME:	George Habib	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	646 Twin Harbor Road		
CITY/ST/ZIP/CO:	Reedville, VA 22539		

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/ WILLIAM JOHNSON	WILLIAM JOHNSON, TREASURER	4/14/2014
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.