

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214538230		
1.) CORPORATION NAME: LIBERTY TOWNHOUSE HOMEOWNERS ASSOCIATION, INC.		DUE DATE: 7/31/2014 SCC ID NO: 05066071		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JENNIFER L BLUM 219 INDEPENDENCE DR STAFFORD, VA		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED			
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: STAFFORD COUNTY				
4.) STATE OR COUNTRY OF INCORPORATION: VA				
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: PO BOX 1634 CITY/ST/ZIP: STAFFORD, VA 22555				
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: JENNIFER BLUM TITLE: PRESIDENT ADDRESS: 219 INDEPENDENCE DR CITY/ST/ZIP/CO: STAFFORD, VA 22554	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: VICTOR WALDEN TITLE: VICE PRESIDENT ADDRESS: 313 INDEPENDENCE DR CITY/ST/ZIP/CO: STAFFORD, VA 22554	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR		
NAME: PAMELA HOWDEN TITLE: SECRETARY ADDRESS: 211 INDEPENDENCE DR CITY/ST/ZIP/CO: STAFFORD, VA 22554	<input checked="" 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/ JENNIFER BLUM SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JENNIFER BLUM, PRESIDENT PRINTED NAME AND CORPORATE TITLE	8/3/2014 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.				