

1.) CORPORATION NAME:

FAIROAKS HOMEOWNERS ASSOCIATION, INC.

DUE DATE: **10/29/2010**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
PAUL R. HYDE
6 HICKORY NUT LANE
STAUNTON, VA 24401**

SCC ID NO: **05475231**

5.) STOCK INFORMATION

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

AUGUSTA COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 632

CITY/ST/ZIP: FISHERSVILLE, VA 22939-

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: NANCY MILLER
TITLE: TREASURER
ADDRESS: 26 HICKORY NUT LANE
CITY/ST/ZIP/CO: STAUNTON, VA 24401-

OFFICER DIRECTOR

NAME: PAUL R HYDE
TITLE: PRESIDENT
ADDRESS: 6 HICKORY NUT LN
CITY/ST/ZIP/CO: STAUNTON, VA 24401-

OFFICER DIRECTOR

NAME: HOLLY ANDRUS
TITLE: DIRECTOR
ADDRESS: 30 HICKORY NUT LN
CITY/ST/ZIP/CO: STAUNTON, VA 24401-

OFFICER DIRECTOR

NAME: LARRY W ROBINSON
TITLE: DIRECTOR
ADDRESS: 37 HICKORY NUT LN
CITY/ST/ZIP/CO: STAUNTON, VA 24401-

OFFICER DIRECTOR

NAME: MELISSA DRUFF
TITLE: SECRETARY
ADDRESS: 27 HICKORY NUT LN
CITY/ST/ZIP/CO: STAUNTON, VA 24401-

OFFICER 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.

<u>/s/ PAUL R HYDE</u>	<u>PAUL R HYDE, PRESIDENT</u>	<u>10/2/2010</u>
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.