

1.) CORPORATION NAME: <b>Hampton Roads Public Works Academy, Inc.</b>	DUE DATE: <b>4/30/2013</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CHAD OXTON 866 CAROLINA RD SUFFOLK, VA</b>	SCC ID NO: <b>05763560</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>SUFFOLK CITY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 6082

CITY/ST/ZIP: NORFOLK, VA 23508

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHAD OXTON		
TITLE: TREASURER		
ADDRESS: CITY OF SUFFOLK		
CITY/ST/ZIP/CO: 866 CAROLINA ROAD		
		SUFFOLK, VA 23434

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: IASON CALBERT		
TITLE: CHAIRMAN		
ADDRESS: CITY OF NEWPORT NEWS		
CITY/ST/ZIP/CO: 514 OYSTER POINT ROAD		
		NEWPORT NEWS, VA 23602

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: DEBBIE CROFFORD		
TITLE: SECRETARY		
ADDRESS: HRFD		
CITY/ST/ZIP/CO: 1440 AIR RAIL AVENUE		
		VIRGINIA BEACH, VA 23455

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Jason Mitchell		
TITLE: Vice Chairman		
ADDRESS: 3556 Dam Neck Rd		
CITY/ST/ZIP/CO: Virginia Beach, VA 23453		

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/ CHAD OXTON	CHAD OXTON, TREASURER	4/26/2013
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.