

1.) CORPORATION NAME: <b>Second Calvary Development Corporation</b>	DUE DATE: <b>7/31/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>WILLIAM T MASON JR 2113 CARRIAGE LN NORFOLK, VA</b>	SCC ID NO: <b>05806740</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>NORFOLK 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: 2940 CORPREW AVE CITY/ST/ZIP: NORFOLK, VA 23504	
--	--

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: PHILLIP D BROOKS TITLE: PRESIDENT ADDRESS: 1351 LITTLE NECK RD CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23452	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: CORA E BRIDGERS TITLE: TREASURER ADDRESS: 4029 WINDSOR GATE PL CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23452	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOCQUELYN CHAPMAN TITLE: DIRECTOR ADDRESS: 2448 DUNBARTON DRIVE CITY/ST/ZIP/CO: CHESAPEAKE, VA 23325	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JAMES A WINSTEAD TITLE: DIRECTOR ADDRESS: 308 MAPLESHORE DR CITY/ST/ZIP/CO: CHESAPEAKE, VA 23320-6920	<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/ PHILLIP D BROOKS	PHILLIP D BROOKS, PRESIDENT	8/7/2014
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.