

1.) CORPORATION NAME:

The Peninsula Jaycees, Inc.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JAMES HART
210 DUNN CIRCLE
HAMPTON, VA**

SCC ID NO: **05947957**

5.) STOCK INFORMATION

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

HAMPTON CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 22 WARNER ROAD

CITY/ST/ZIP: HAMPTON, VA 23666

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: JODI DEAN TITLE: PRESIDENT ADDRESS: 22 WARNER RD CITY/ST/ZIP/CO: HAMPTON, VA 23666	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: AMANDA DELUTIS TITLE: VICE PRESIDENT ADDRESS: 7282 ABRAHAM CT CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23605	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: KATHERINE GREEN TITLE: VICE PRESIDENT ADDRESS: 239 BRECKINRIDGE DR CITY/ST/ZIP/CO: HAMPTON, VA 23666	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: KATIE GODIN TITLE: VICE PRESIDENT ADDRESS: 5 LILLIAN CT CITY/ST/ZIP/CO: HAMPTON, VA 23669	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CAMILLE ATKINS TITLE: VICE PRESIDENT ADDRESS: 500 BERKSHIRE TERRACE CITY/ST/ZIP/CO: HAMPTON, VA 23666	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: NICOLE VALERIO TITLE: SECRETARY ADDRESS: 13232 CHRISTY LANE #18 CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23608	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: CATHY BROWN TITLE: TREASURER ADDRESS: 13306A DEWALD CIR CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23602	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ROBERT LINCOLN TITLE: DIRECTOR ADDRESS: 401B COLUMBIA ST CITY/ST/ZIP/CO: PORTSMOUTH, VA 23704	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: KRISTY TURNAGE TITLE: DIRECTOR ADDRESS: 6 PLAZA DR CITY/ST/ZIP/CO: HAMPTON, VA 23608	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: THOMAS DEAN TITLE: CHAIRMAN ADDRESS: 22 WARNER RD CITY/ST/ZIP/CO: HAMPTON, VA 23666	<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/ THOMAS DEAN	THOMAS DEAN, CHAIRMAN	2/4/2014
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.		