

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214506899

1.) CORPORATION NAME:

Capital Area Health Education Center

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**TRACEY CAUSEY
CAPITAL AHEC
8719 FOREST HILL AV**

SCC ID NO: **06095749**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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BON AIR, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8719 FOREST AVENUE

CITY/ST/ZIP: North CHESTERFIELD, VA 23235

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:	THELMA WATSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	24 E CARY ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		

NAME:	ROLAND MOORE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 85622		
CITY/ST/ZIP/CO:	RICHMOND, VA 23285		

NAME:	ELIZABETH B MORSE,RN,CPNP	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9900 AGINEOULT LANE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23237		

NAME:	Tracy Causey	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2025 E Main Str		
CITY/ST/ZIP/CO:	Richmond, VA 24223		

NAME:	Richard Lewis, CPA, CFE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4401 Dominion Blvd		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		

NAME:	Michael Welch, PhD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2001 Maywill St		
CITY/ST/ZIP/CO:	Richmond, VA 23230		

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/ Tracy Causey	Tracy Causey, PRESIDENT	1/31/2014
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.		