

1.) CORPORATION NAME:

**Virginia Beach Parks and Recreation Foundation**

DUE DATE: **2/29/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JEFFREY W BRESER**

**Willcox & Savage PC  
440 Monticello Ave. Ste 2200**

SCC ID NO: **06103436**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

**Norfolk, VA 23510**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**NORFOLK CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 440 MONTICELLO AVE STE 2200

CITY/ST/ZIP: NORFOLK, VA 23510

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:	LILLIE GILBERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1428 BACK COVE ROAD		
CITY/ST/ZIP/CO:	VA BEACH, VA 23454		
NAME:	JEFFREY W BRESER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	3921 AERIES WAY		
CITY/ST/ZIP/CO:	VA BEACH, VA 23455		
NAME:	RON KAUFMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	5193 FOXBORO LANDING		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23464-5607		
NAME:	NICK ANOIA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1174 HORN POINT ROAD		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23456		
NAME:	BILL BOYCE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	207 76TH ST		
CITY/ST/ZIP/CO:	VA BEACH, VA 23451		
NAME:	WALTER T CAMP	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	4692 BERRYWOOD RD		
CITY/ST/ZIP/CO:	VA BEACH, VA 23464		

NAME: CAROL WALKER TITLE: VICE PRESIDENT ADDRESS: 1112 LASKIN ROAD CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23451	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Susie Walston TITLE: DIRECTOR ADDRESS: 3708 Jefferson Blvd CITY/ST/ZIP/CO: Virginia Beach, VA 23451	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jason Murphy TITLE: DIRECTOR ADDRESS: 113 63rd Street CITY/ST/ZIP/CO: Virginia Beach, VA 23451	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Tami Cole TITLE: DIRECTOR ADDRESS: 2449 London Pointe Drive CITY/ST/ZIP/CO: Virginia Beach, VA 23454	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Pete Striffler TITLE: DIRECTOR ADDRESS: 813 greentree Arch CITY/ST/ZIP/CO: Virginia Beach, VA 23451	<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/ JEFFREY W BREESER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JEFFREY W BREESER, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/30/2012 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.		