

1.) CORPORATION NAME: **WEST END BUSINESS ASSOCIATION** DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **WENDY R ALBERT**  
**4231 DUKE ST**  
**ALEXANDRIA, VA** SCC ID NO: **06260517**

5.) STOCK INFORMATION  

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

4.) STATE OR COUNTRY OF INCORPORATION:  
**VA**

6.) PRINCIPAL OFFICE ADDRESS:  
  
ADDRESS: 3213 DUKE ST  
BOX 128  
  
CITY/ST/ZIP: ALEXANDRIA, VA 22314

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: Peter Baldwin TITLE: PRESIDENT ADDRESS: 3213 DUKE ST BOX 128 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Lynn Bostain TITLE: VICE PRESIDENT ADDRESS: 3213 DUKE ST BOX 128 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Mike Barber TITLE: Treasurer ADDRESS: 3213 DUKE ST, #128 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SUSANNE WALTMYER TITLE: SECRETARY ADDRESS: 3213 DUKE ST #128 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ Mike Barber	Mike Barber, Treasurer	10/30/2013
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.