

1.) CORPORATION NAME:

Willcox Watershed Conservancy, Incorporated

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**SAMUEL P JOHNSON III
43 RIVES RD
PETERSBURG, VA 23805**

SCC ID NO: **06709828**

5.) STOCK INFORMATION

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

PETERSBURG CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 1252

CITY/ST/ZIP: PETERSBURG, VA 23804

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:	SUZANNE P WRIGHT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 1252		
CITY/ST/ZIP/CO:	PETERSBURG, VA 23804		
NAME:	ROBERT WALKER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	PO BOX 1252		
CITY/ST/ZIP/CO:	PETERSBURG, VA 23804		
NAME:	JAMES D BECK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	PO BOX 1252		
CITY/ST/ZIP/CO:	PETERSBURG, VA 23804		
NAME:	VICTORIA HAUSER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	PO BOX 1252		
CITY/ST/ZIP/CO:	PETERSBURG, VA 23804		
NAME:	TERRY AMMONS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	STUDIO AMMONS		
CITY/ST/ZIP/CO:	235 NORTH MARKET STREET PETERSBURG, VA 23803		
NAME:	WALTER H BROWN III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1115 FORT HAYES DEIVE		
CITY/ST/ZIP/CO:	PETERSBURG, VA 23805		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BETTIE H GUTHRIE DIRECTOR 400 RAVENSCROFT DRIVE PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ETHEL NORRIS HAUGHTON DIRECTOR VIRGINIA STATE UNIVERSITY 2229 ANDERSON STREET PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J ROBERT HICKS DIRECTOR 3718 STRATFORD ROAD RICHMOND, VA 23225	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN ROONEY DIRECTOR 1120 JETT AVENUE COLONIAL HEIGHTS, VA 23834	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BETTY STEELE DIRECTOR 1854 WESTOVER AVENUE PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HORACE P WEBB DIRECTOR 1974 RIDGEWOOD DRIVE PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHARON D WILLIAMS DIRECTOR 135 NORTH UNION STREET ROOM 304 PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL WELLS DIRECTOR 13251 COLLEGE ROAD PETERSBURG, VA 23805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TAMI YERBY DIRECTOR PETERSBURG PARKS & LEISURE SERVICES 1937 JOHNSON ROAD PETERSBURG, VA 23805	<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/ JAMES D BECK	JAMES D BECK, TREASURER	1/2/2013
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.