

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215500589

1.) CORPORATION NAME:

**FLUVANNA COUNTY HIGH SCHOOL ATHLETIC
BOOSTERSCLUB, INC.**

DUE DATE: **1/31/2015**

SCC ID NO: **07181712**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JAMES H BARLOW JR
FLUVANNA COUNTY HIGH SCHOOL
1918 THOMAS JEFFERSON PARKWAY**

5.) STOCK INFORMATION

| | |
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| CLASS | AUTHORIZED |
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PALMYRA, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FLUVANNA COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1918 Thomas Jefferson Parkway
1918 Thomas Jefferson Parkway

CITY/ST/ZIP: Palmyra, VA 22963

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.

| | | | |
|-----------------|---------------------------|---|--|
| | | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | JAMES H BARLOW, JR | | |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 302 CRESTFIELD COURT | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22911 | | |

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|-----------------|---------------------------|---|--|
| | | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | MARGO BRUCE | | |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 540 EVERGREEN CHURCH ROAD | | |
| CITY/ST/ZIP/CO: | PALMYRA, VA 22963 | | |

| | | | |
|-----------------|---------------------|---|--|
| | | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | KANDY KOVALESKI | | |
| TITLE: | TREASURER | | |
| ADDRESS: | 39 LITTLE POND LANE | | |
| CITY/ST/ZIP/CO: | PALMYRA, VA 22963 | | |

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|-----------------|--------------------|---|--|
| | | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | MARJORY L BROWN | | |
| TITLE: | SECRETARY | | |
| ADDRESS: | 22 TUSCARORA DRIVE | | |
| CITY/ST/ZIP/CO: | PALMYRA, VA 22963 | | |

| | | | |
|-----------------|--------------------|---|--|
| | | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | DAVID SCOTT MORRIS | | |
| TITLE: | SERGEANT ARMS | | |
| ADDRESS: | 40 MOOREWOOD PLACE | | |
| CITY/ST/ZIP/CO: | PALMYRA, VA 22963 | | |

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 H BARLOW, JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | JAMES H BARLOW, JR, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 12/9/2014 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.