

1.) CORPORATION NAME:

The Troubadours Community Theatre Group, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

UNITED STATES CORPORATION AGENTS INC

4870 SADLER RD STE 300

GLEN ALLEN, VA 23060

DUE DATE: **10/31/2011**

SCC ID NO: **07294127**

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4903 SANBURNE PARKWAY

CITY/ST/ZIP: SANDSTON, VA 23150-

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: ELIZABETH MONDOUX
TITLE: DIRECTOR
ADDRESS: 4903 SANBURNE PKWY
CITY/ST/ZIP/CO: SANDSTON, VA 23150-

OFFICER DIRECTOR

NAME: MADONNA GORDON
TITLE: DIRECTOR
ADDRESS: 4903 SANBURNE PARKWAY
CITY/ST/ZIP/CO: SANDSTON, VA 23150-

OFFICER DIRECTOR

NAME: MARIE ROUSSEL
TITLE: TREASURER
ADDRESS: 1573 PRESIDENTIAL DRIVE
CITY/ST/ZIP/CO: RICHMOND, VA 23228-

OFFICER DIRECTOR

NAME: COLETTE WOODS
TITLE: SECRETARY
ADDRESS: 7313 TRAVELLERS WAY
CITY/ST/ZIP/CO: MECHANICSVILLE, VA 23111-

OFFICER DIRECTOR

NAME: ASHLEY HAILEY
TITLE: DIRECTOR
ADDRESS: 112 TREVA ROAD
CITY/ST/ZIP/CO: SANDSTON, VA 23150-

OFFICER DIRECTOR

NAME: PATRICIA ARKESTEYN TITLE: DIRECTOR ADDRESS: LEGACY PARK CITY/ST/ZIP/CO: MECHANICSVILLE, VA 23111-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHRISTOPHER MONDOUX TITLE: DIRECTOR ADDRESS: 4903 SANBURNE PARKWAY CITY/ST/ZIP/CO: SANDSTON, VA 23150-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KAY SNEDDEN TITLE: DIRECTOR ADDRESS: 133 N ELM CITY/ST/ZIP/CO: HIGHLAND SPRINGS, VA 23075-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: FRAN MILBY TITLE: DIRECTOR ADDRESS: 7108 CLUB DRIVE CITY/ST/ZIP/CO: QUINTON, VA 23141-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KENNETH CARLSON TITLE: DIRECTOR ADDRESS: 11240 OLD CHURCH ROAD CITY/ST/ZIP/CO: QUINTON, VA 23124-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHRIS L. SNEDDEN TITLE: DIRECTOR ADDRESS: 133 N ELM CITY/ST/ZIP/CO: HIGHLAND SPRINGS, VA 23075-	<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/ ELIZABETH MONDOUX SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ELIZABETH MONDOUX, DIRECTOR PRINTED NAME AND CORPORATE TITLE
12/3/2011 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.	