

1.) CORPORATION NAME:

**Monument City Music, Incorporated**

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ELIZABETH GRIFFIN ROBERTSON  
4501 HIGHWOODS PKWY STE 210  
GLEN ALLEN, VA 23060**

SCC ID NO: **07296940**

5.) STOCK INFORMATION

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

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4501 HIGHWOODS PARKWAY  
SUITE 210

CITY/ST/ZIP: GLEN ALLEN, VA 23060

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:	KENT SWARTS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3518 DAMSEL STONE COURT		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23059		

NAME:	DARICE BOWLES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	6415 PATTERSON AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23226		

NAME:	LEE RETTIG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1620 HANOVER AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23220		

NAME:	JAMES FINLEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12117 GLEN GARY CIRCLE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23233		

NAME:	Jennifer Thomas	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2 Old Sellers Way		
CITY/ST/ZIP/CO:	Richmond, VA 23227		

NAME:	Paul Blacker	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3018 Grove Avenue		
CITY/ST/ZIP/CO:	Richmond, VA 23221		

NAME: Janet Fox TITLE: DIRECTOR ADDRESS: 4610 Fitzroy Road CITY/ST/ZIP/CO: Richmond, VA 23234	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Scott Garka TITLE: DIRECTOR ADDRESS: 3624 Riverdowns North Drive CITY/ST/ZIP/CO: Midlothian, VA 23113	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Nikolaus Herberlein TITLE: DIRECTOR ADDRESS: 3555 Grove Avenue, Apt. 2 CITY/ST/ZIP/CO: Richmond, VA 23221	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Nancy Ottenritter TITLE: DIRECTOR ADDRESS: 5109 Bromley Lane CITY/ST/ZIP/CO: Richmond, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Suzannah Pogue TITLE: DIRECTOR ADDRESS: 1600 Bellevue Avenue CITY/ST/ZIP/CO: Richmond, VA 23227	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Megan Schowengerdt TITLE: DIRECTOR ADDRESS: 5 Sanderling Avenue CITY/ST/ZIP/CO: Highland Springs, VA 23075	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Don Thompson TITLE: DIRECTOR ADDRESS: 1500 Wilmington Avenue CITY/ST/ZIP/CO: Richmond, VA 23227	<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/ DARICE BOWLES	DARICE BOWLES, PRESIDENT	11/16/2012
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.		