

1.) CORPORATION NAME:

The Hills of Barcroft Homeowners Association, Inc.

DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
ANN BAKER
6209 SQUIRES HILL DRIVE
FALLS CHURCH, VA 22044**

SCC ID NO: **07347610**

5.) STOCK INFORMATION

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

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6209 SQUIRES HILL DRIVE

CITY/ST/ZIP: FALLS CHURCH, VA 22044-

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: WILLIAM D. DOLAN, III
TITLE: DIRECTOR
ADDRESS: 6225 SQUIRES HILL DRIVE
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22044-

OFFICER DIRECTOR

NAME: PHILIP IVES
TITLE: DIRECTOR
ADDRESS: 6207 SQUIRES HILL DRIVE
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22044-

OFFICER DIRECTOR

NAME: MARIE BLANCO
TITLE: DIRECTOR
ADDRESS: 6221 SQUIRES HILL DRIVE
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22044-

OFFICER DIRECTOR

NAME: BOB STACY
TITLE: DIRECTOR
ADDRESS: 6213 SQUIRES HILL DRIVE
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22044-

OFFICER DIRECTOR

NAME: ANN BAKER
TITLE: PRESIDENT
ADDRESS: 6209 SQUIRES HILL DRIVE
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22044-

OFFICER 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.

<u>/s/ WILLIAM D. DOLAN, III</u>	<u>WILLIAM D. DOLAN, III, DIRECTOR</u>	<u>2/23/2012</u>
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.