

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214526005

1.) CORPORATION NAME:

North Berkshire Condominium Association, Inc.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JEFFREY G LENHART
100 10TH STREET NE STE 300
HARRISONBURG, VA**

SCC ID NO: **07370703**

5.) STOCK INFORMATION

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

CHARLOTTESVILLE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2202 N BERKSHIRE ROAD
STE 101

CITY/ST/ZIP: CHARLOTTESVILLE, VA 22901

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: | DAVID B. HAMER | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 2202 N. BERKSHIRE RD. STE. 101 | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22901 | | |

| | | | |
|-----------------|----------------------------------|----------------------------------|--|
| NAME: | JOHN E. KNIGHT | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 202 N. BERKSHIRE RD. STE. 203 | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22901 | | |

| | | | |
|-----------------|-----------------------------------|----------------------------------|--|
| NAME: | JOSEPH J. WAFF, III | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 2202 N. BERKSHIRE RD. STE. 103 | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22901 | | |

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|-----------------|-----------------------------------|---|--|
| NAME: | GREGORY L. WHITMER | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | V.P, SEC, TREAS | | |
| ADDRESS: | 2202 N. BERKSHIRE RD. STE. 102 | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22901 | | |

| | | | |
|-----------------|-----------------------------------|----------------------------------|--|
| NAME: | ROBERT E. WILKERSON | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 2202 N. BERKSHIRE RD. STE. 202 | | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22901 | | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | DOUGLAS GRANVILLE BROOKS, SR | |
| TITLE: | MANAGING AGENT | |
| ADDRESS: | 1500 AMHERST STREET | |
| CITY/ST/ZIP/CO: | CHARLOTTESVILLE, VA 22903 | |

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/ DOUGLAS GRANVILLEBROOKS, SR | DOUGLAS GRANVILLEBROOKS, SR, | 5/20/2014 |
| _____ | _____ | _____ |
| 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.