

|   |   |       |            |        |   |
|---|---|-------|------------|--------|---|
| 1.) CORPORATION NAME:<br><b>Hampton Roads Traffic Club, Inc.</b><br>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>BENJAMIN B NELSON III<br/>         6310 EAST VIRGINIA BEACH BLVD<br/>         NORFOLK, VA</b><br>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>NORFOLK CITY</b><br>4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b> | DUE DATE: <b>3/31/2016</b><br>SCC ID NO: <b>07623846</b><br>5.) STOCK INFORMATION<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>8</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 8 |
| CLASS   | AUTHORIZED  |       |            |        |   |
| COMMON  | 8   |       |            |        |   |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 62412

CITY/ST/ZIP: VIRGINA BEACH, VA 23466

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: DNAYNE PASCHALL<br>TITLE: PRESIDENT<br>ADDRESS: P O BOX 62412<br>CITY/ST/ZIP/CO: VIRGINA BEACH, VA 23466 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
|--|---|-----------------------------------|--|

|   |   |                                   |  |
|---|---|-----------------------------------|--|
| NAME: CHERYL BARRET<br>TITLE: VICE PRESIDENT<br>ADDRESS: PO BOX 62412<br>CITY/ST/ZIP/CO: VA BEACH, VA 23466 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
|---|---|-----------------------------------|--|

|  |   |                                   |  |
|--|---|-----------------------------------|--|
| NAME: BENJAMIN B NELSON III<br>TITLE: TREASURER<br>ADDRESS: 6310 EAST VIRGINIA BEACH BLVD<br>CITY/ST/ZIP/CO: NORFOLK, VA 23502 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |  |
|--|---|-----------------------------------|--|

|  |   |                                   |  |
|--|---|-----------------------------------|--|
| NAME: CINDY WENTZEL<br>TITLE: SECRETARY<br>ADDRESS: PO BOX 62412<br>CITY/ST/ZIP/CO: VA BEACH, VA 23466 | <input checked="" type="checkbox"/> OFFICER | <input 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/ BENJAMIN B NELSON III                           | BENJAMIN B NELSON III,<br>TREASURER | 4/26/2016 |
| 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.