

1.) CORPORATION NAME:

**WINCHESTER HOMES INC.**

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F0513392**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6905 ROCKLEDGE DRIVE  
SUITE 800

CITY/ST/ZIP: BETHESDA, MD 20817

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:	ALAN E SHAPIRO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME:	DIANE O'CONNELL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/ASST SEC		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME:	JAMES A. ANDERS, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME:	THOMAS K. BOURKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME:	MARC T. CHADWICK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME:	MICHAEL J. CONLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6905 ROCKLEDGE DR STE 800		
CITY/ST/ZIP/CO:	BETHESDA, MD 20817		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLAIRE S. GRACE VICE PRESIDENT 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL C. KARNs VICE PRESIDENT 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS R STOCKS VP/T 32901 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98001	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN G. STUART VICE PRESIDENT 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLAIRE S. GRACE SECRETARY 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHERI A. DRAIN ASST SECRETARY 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN B. KAY ASST SECRETARY 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICKI A. MERRICK ASST SECRETARY 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALLISON RENZ ASST SECRETARY 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS M. SMITH ASST SECRETARY 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY W. NITTA ASST TREASURER 33663 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98003	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER D. COLLINS SVP 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN P MONACCI SVP 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN J. NARDELLA SVP 6905 ROCKLEDGE DR STE 800 BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE B BURROWS DIRECTOR 32901 WEYERHAEUSER WAY SOUTH FEDERAL WAY, WA 98001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DIANE O'CONNELL	DIANE O'CONNELL, VP/ASST SEC	1/22/2013
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.