

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213544324

1.) CORPORATION NAME:

MAZZETTI NASH LIPSEY BURCH, INC.

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1436247**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 220 MONTGOMERY STREET SUITE 650

CITY/ST/ZIP: SAN FRANCISCO, CA 94104

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: WALTER N VERNON
 TITLE: PRESIDENT
 ADDRESS: 220 MONTGOMERY ST STE 650
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94104

OFFICER DIRECTOR

NAME: DARRYL WANDRY
 TITLE: TREASURER
 ADDRESS: 220 MONTGOMERY ST STE 650
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94104

OFFICER DIRECTOR

NAME: JOHN M PAPPAS
 TITLE: SECRETARY
 ADDRESS: 220 MONTGOMERY ST STE 650
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94104

OFFICER DIRECTOR

NAME: KARL ATTEBERRY
 TITLE: DIRECTOR
 ADDRESS: 520 SW SIXTH AVENUE
 CITY/ST/ZIP/CO: PORTLAND, OR 97204

OFFICER DIRECTOR

NAME: DONNA DEKARD
 TITLE: DIRECTOR
 ADDRESS: 220 MONTGOMERY STREET
 SUITE 650
 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94104

OFFICER DIRECTOR

NAME: DAVID EVANS
 TITLE: DIRECTOR
 ADDRESS: 2100 SW RIVER PARKWAY
 CITY/ST/ZIP/CO: POTLAND, OR 97201

OFFICER DIRECTOR

NAME: JON INMAN TITLE: DIRECTOR ADDRESS: 220 MONTGOMERY ST STE 650 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94108	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PETI JONES-THOMPSON TITLE: DIRECTOR ADDRESS: 12727 FEATHERWOOD DRIVE CITY/ST/ZIP/CO: SUITE 285 HOUSTON, TX 77034	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN KARMIRIS TITLE: DIRECTOR ADDRESS: 220 MONTGOMERY ST STE 650 CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94104	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID LENNON TITLE: DIRECTOR ADDRESS: 320 SEVEN SPRINGS WAY SUITE 115 CITY/ST/ZIP/CO: NASHVILLE, VA 37027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: EDWARD SPIVEY LIPSEY TITLE: DIRECTOR ADDRESS: 320 SEVEN SPRINGS WAY SUITE 115 CITY/ST/ZIP/CO: NASHVILLE, TN 37207	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHRIS POLAND TITLE: DIRECTOR ADDRESS: 235 MONTGOMERY STREET CITY/ST/ZIP/CO: SUITE 500 SAN FRANCISCO, CA 94104	<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/ WALTER N VERNON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	WALTER N VERNON, PRESIDENT PRINTED NAME AND CORPORATE TITLE	9/23/2013 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.		