

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213524351

1.) CORPORATION NAME:

Take Charge America, Inc.

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1591694**

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

AZ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 20620 NORTH 19TH AVENUE

CITY/ST/ZIP: PHOENIX, AZ 85027-3585

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:	CAROL J LOWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME:	DAVID H RICHARDSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME:	RALPH GILBERTSEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME:	DEBORAH HAYNES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME:	ROBERT J LESLIE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME:	ANDREA WHITE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	20620 N 19TH AVENUE		
CITY/ST/ZIP/CO:	PHOENIX, AZ 85027		

NAME: Mike Sullivan TITLE: VICE PRESIDENT ADDRESS: 20620 N 19th Avenue CITY/ST/ZIP/CO: Phoenix, AZ 85027	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Alice Sweeney TITLE: DIRECTOR ADDRESS: C/O 20620 N 19th Avenue CITY/ST/ZIP/CO: Phoenix, AZ 85027	<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/ DAVID H RICHARDSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID H RICHARDSON, PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/23/2013 DATE
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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.