

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213512140

1.) CORPORATION NAME:

AMITY FELLOWSERVE, INC.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CT CORPORATION SYSTEM

**4701 COX RD STE 301
GLEN ALLEN, VA 23060**

SCC ID NO: **F1699711**

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:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5228 VALLEYPONTE PARKWAY
SUITE 1 BUILDING B

CITY/ST/ZIP: ROANOKE, VA 24019

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:	THOMAS M CLARKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	5228 VALLEYPONTE PKWY		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019		

NAME:	BOB BELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	5228 VALLEYPONTE PKWY		
CITY/ST/ZIP/CO:	STE 1 BLDG B ROANOKE, VA 24019		

NAME:	LORI HUFFMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	5228 VALLEYPONTE PKWY		
CITY/ST/ZIP/CO:	BUILDING B SUITE 1 ROANOKE, VA 24019		

NAME:	LYNN HODGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1001 GENTER 1B		
CITY/ST/ZIP/CO:	LAJOLLA, CA 92037		

NAME:	ANA CLARKE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5228 VALLEYPONTE PKWY		
CITY/ST/ZIP/CO:	STE 1 BLDG B ROANOKE, VA 24019		

NAME:	DAVID ERICKSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3308 YORKWAY		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21222		

NAME:	WAYNE FUQUAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5228 VALLEYPONTE PKWY		
CITY/ST/ZIP/CO:	BLDG B SUITE 1 ROANOKE, VA 24019		

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/ LORI HUFFMAN	LORI HUFFMAN, TREASURER	3/11/2013
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.