

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215507836

1.) CORPORATION NAME:

**EPARCHY OF THE OLD DOMINION**

DUE DATE: **4/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM C BARON  
38405 WOODED HOLLOW DR  
HAMILTON, VA**

SCC ID NO: **F1858820**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LOUDOUN COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 38405 WOODED HOLLOW DR

CITY/ST/ZIP: HAMILTON, VA 20158

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.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WILLIAM BARON		
TITLE:	BOTH		
ADDRESS:	38405 WOODED HOLLOW DR		
CITY/ST/ZIP/CO:	HAMILTON, VA 20158		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	OLVA V BARON		
TITLE:	OFFICER		
ADDRESS:	38405 WOODED HOLLOW DR		
CITY/ST/ZIP/CO:	HAMILTON, VA 20158		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	OLGA V BARON		
TITLE:	DIRECTOR		
ADDRESS:	38405 WOODED HOLLOW DR		
CITY/ST/ZIP/CO:	HAMILTON, VA 20158		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PAUL B RONDONANSKI		
TITLE:	DIRECTOR		
ADDRESS:	8 GARFIELD AVE		
CITY/ST/ZIP/CO:	NORWICH, CT 06360		

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/ WILLIAM BARON	WILLIAM BARON, BOTH	2/27/2015
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.