

1.) CORPORATION NAME: <b>Hare, Hare &amp; Myers, P.A., P.C. (USED IN VA BY:Hare, Hare &amp; Myers, P.A.)</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ANTHONY R HARE 33 BERKSHIRE RD WILLIAMSBURG, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>JAMES CITY COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>FL</b>	DUE DATE: <b>5/31/2015</b> SCC ID NO: <b>F1896168</b> 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>200</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	200
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6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 33 BERKSHIRE ROAD  CITY/ST/ZIP: WILLIAMSBURG, VA 23188
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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.
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NAME: DIANE C HARE TITLE: PRESIDENT ADDRESS: 33 BERKSHIRE ROAD CITY/ST/ZIP/CO: WILLIAMSBURG, VA 23188	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: ANTHONY R HARE TITLE: VICE PRESIDENT ADDRESS: 33 BERKSHIRE ROAD CITY/ST/ZIP/CO: WILLIAMSBURG, VA 23188	<input checked="" 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 C HARE	DIANE C HARE, PRESIDENT	3/20/2015
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.