

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214523971

1.) CORPORATION NAME:

AHP I, Inc. (USED IN VA BY: Armada HofflerProperties, Inc.)

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CAPITOL CORPORATE SERVICES INC
10 S JEFFERSON STREET STE 1400
ROANOKE, VA**

SCC ID NO: **F1928714**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ROANOKE CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 222 CENTAL PARK AVE STE 2100

CITY/ST/ZIP: VIRGINIA BEACH, VA 23462

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.

<p>NAME: LOUIS S HADDAD TITLE: CEO & PRES ADDRESS: 222 CENTRAL PARK AVE STE 2100 CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ERIC L SMITH TITLE: SECRE ADDRESS: 222 CENTRAL PARK AVE STE 2100 CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Daniel A Hoffler TITLE: CHAIRMAN ADDRESS: 222 Central Park Ave Suite 2100 CITY/ST/ZIP/CO: Virginia Beach, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: A Russell Kirk TITLE: VICE CHAIRMAN ADDRESS: 222 Central Park Avenue Suite 2100 CITY/ST/ZIP/CO: Virginia Beach, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Michael P O TITLE: TREASURER ADDRESS: 222 Central Park Avenue Suite 2100 CITY/ST/ZIP/CO: Virginia Beach, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Anthony P Nero TITLE: Pres. Develpmt ADDRESS: 222 Central Park Avenue Suite 2100 CITY/ST/ZIP/CO: Virginia Beach, VA 23462</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Shelly R Hampton Pres Asst Mgt 222 Central Park Avenue Suite 2100 Virginia Beach, VA 23462	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Eric E Apperson Pres Constrcton 249 Central Park Avenue Suite 300 Virginia Beach, VA 23462	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	George F Allen DIRECTOR 717 Princess Street Alexandria, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James A Carroll DIRECTOR 3950 University Drive Suite 301 Fairfax, VA 22030	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John W Snow DIRECTOR 1800 Bayberry Court Suite 101 Richmond, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joseph W Prueher DIRECTOR 126 Pinewood Road Virginia Beach, VA 23451	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	James C Cherry DIRECTOR 1043 E. Morehead Street Suite 200 Charlotte, NC 28204	<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/ LOUIS S HADDAD	LOUIS S HADDAD, CEO & PRES	5/6/2014
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.