

2020 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

Commonwealth of Virginia
 State Corporation Commission
 Office of the Clerk
 Entity ID: 04582417
 Filing Number: 2104203168428
 Filing Date/Time: 04/20/2021 12:11 PM
 Effective Date/Time: 04/20/2021 12:11 PM



1. CORPORATION NAME:

GUNSTON CORNER TOWNHOUSE HOMEOWNERS ASSOCIATION, INC.

DUE DATE: December 31, 2020

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: 04582417

BUSINESS ENTITY THAT IS AUTHORIZED TO TRANSACT BUSINESS IN VIRGINIA

RESAGENT, INC.

5. TOTAL NUMBER OF AUTHORIZED SHARES: 0

3190 FAIRVIEW PARK DRIVE
 SUITE 800
 FALLS CHURCH, VA, 22042 - 0000, USA

3. CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4. STATE OR COUNTRY OF INCORPORATION:

Virginia

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: LEGUM & NORMAN 3130 FAIRVIEW PARK DRIVE #200	ADDRESS:
CITY/ST/ZIP: FALLS CHURCH, VA, 22042 - 0000	CITY/ST/ZIP:

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.

Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input checked="" type="checkbox"/> Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Replacement
<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MARIA HOLMES	NAME: Robert Atkins
TITLE:	TITLE: President
ADDRESS: 8214 BATES ROAD	ADDRESS: 9240 McCarty Rd.
CITY/ST/ZIP: LORTON, VA 22079-0000	CITY/ST/ZIP: Lorton, VA 22079

I affirm that the information contained in this report is accurate and complete as of the date below.

Robert Atkins

Robert Atkins, President

8 April 2021

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 that is false in any material respect with intent that the document be delivered to the Commission for filing.

2020 ANNUAL REPORT CONTINUED

CORPORATION NAME:
GUNSTON CORNER TOWNHOUSE HOMEOWNERS ASSOCIATION, INC.

DUE DATE: December 31, 2020
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7. DIRECTORS AND PRINCIPAL OFFICERS: (continued) All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: ROBERT CLARK TITLE: President ADDRESS: 9235 LORTON VALLEY ROAD CITY/ST/ZIP: LORTON, VA 22079-0000	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: Shean Robinson TITLE: Secretary ADDRESS: 9246 McCarty Rd. CITY/ST/ZIP: Lorton, VA 22079

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<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: JOYCE DOWNING TITLE: Vice President ADDRESS: 9232 MCCARTY DRIVE CITY/ST/ZIP: LORTON, VA 22079-0000	<input type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR NAME: TITLE: ADDRESS: CITY/ST/ZIP:

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<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: SUSAN MAGNOTTI TITLE: MEMBER AT LARGE ADDRESS: 9219 LORTON VALLEY RD CITY/ST/ZIP: LORTON, VA 22079-0000	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: Michelle Rogers TITLE: Treasurer ADDRESS: 9221 McCarty Rd. CITY/ST/ZIP: Lorton, VA 22079

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<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: MICHELLE ROGERS TITLE: MEMBER AT LARGE ADDRESS: 9221 MCCARTY RD. CITY/ST/ZIP: LORTON, VA 22079-0000	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR NAME: Maria Holmes TITLE: Member at Large ADDRESS: 8214 Bates Rd. CITY/ST/ZIP: Lorton, VA 22079