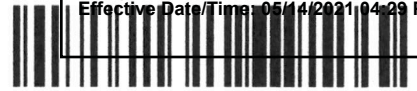


**2021 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

Commonwealth of Virginia
State Corporation Commission
Office of the Clerk
Entity ID: 00267328
Filing Number: 2105143260400
Filing Date/Time: 05/14/2021 04:29 PM
Effective Date/Time: 05/14/2021 04:29 PM



1. CORPORATION NAME:
Colonial Virginia Council of Boy Scouts of America, Inc.
2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ATTY.
RICHARD B DONALDSON JR
701 TOWN CENTER DR STE 800
PO BOX 12888
NEWPORT NEWS, VA 23612-2888
3. CITY OR COUNTY OF VA REGISTERED OFFICE:
700-NEWPORT NEWS CITY
4. STATE OR COUNTRY OF INCORPORATION:
VA-Virginia

DUE DATE: **05/31/21**

SCC ID NO.: **0026732-8**

5. TOTAL NUMBER OF AUTHORIZED SHARES:

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: 11834 Canon Blvd Ste L CITY/ST/ZIP Newport News, VA 23606-2581	ADDRESS: 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 checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input 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 type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: CLINTON HAMMETT TITLE: Secretary ADDRESS: 11834 CANON BLVD, SUITE L CITY/ST/ZIP: NEWPORT NEWS, VA 23606-0000	NAME: TITLE: ADDRESS: CITY/ST/ZIP:

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

 SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Clinton Hammett CEO PRINTED NAME AND CORPORATE TITLE	5/11/21 DATE
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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.

2021 ANNUAL REPORT CONTINUED

CORPORATION NAME:

Colonial Virginia Council of Boy Scouts of America
, Inc.

DUE DATE: **05/31/21**

SCC ID NO.: **0026732-8**

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.

Mark appropriate box unless area below is blank: <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input 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 type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: DAVID GROSE TITLE: Treasurer ADDRESS: 11834 CANON BLVD., SUITE L CITY/ST/ZIP: NEWPORT NEWS, VA 23606-0000	NAME: TITLE: ADDRESS: CITY/ST/ZIP:
Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input 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 type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: DEAN CANOVOS TITLE: EXEC BD MBR ADDRESS: 32 AMY BROOKS DRIVE CITY/ST/ZIP: Newport News, VA 23606-0000	NAME: TITLE: ADDRESS: CITY/ST/ZIP:
Mark appropriate box unless area below is blank: <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input 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 type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: RICHARD B DONALDSON JR. TITLE: EXEC BD MBR ADDRESS: 701 TOWN CENTER DR STE 800 CITY/ST/ZIP: NEWPORT NEWS, VA 23606-0000	NAME: TITLE: ADDRESS: CITY/ST/ZIP:
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
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>
NAME: JEFF WASSMER TITLE: EXEC BOARD MEMB ADDRESS: 1 BAY PORT WAY STE 330 CITY/ST/ZIP: Newport News, VA 23606-0000	NAME: Will Sampson TITLE: Exec Board member - President ADDRESS: 721 Lakefront Commons, Newport CITY/ST/ZIP: Newport News, VA 23606

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