

**2022 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

Commonwealth of Virginia
State Corporation Commission
Office of the Clerk
Entity ID: 00369348
Filing Number: 2203224335226
Filing Date/Time: 03/22/2022 12:22 PM
Effective Date/Time: 03/22/2022 12:22 PM



1. CORPORATION NAME:
JAMES RIVER COUNTRY CLUB OF NEWPORT NEWS, INCORPORATED
2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ATTY.
HERBERT V. KELLY, JR.
701 TOWN CENTER DRIVE
SUITE 800
NEWPORT NEWS, VA 23606-0000
3. CITY OR COUNTY OF VA REGISTERED OFFICE:
700-NEWPORT NEWS CITY
4. STATE OR COUNTRY OF INCORPORATION:
VA-Virginia

DUE DATE: 04/30/22

SCC ID NO.: 0036934-8

5. TOTAL NUMBER OF AUTHORIZED SHARES: 25,000

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: 1500 Country Club Rd	ADDRESS:
CITY/ST/ZIP Newport News, VA 23606-2840	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.

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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 type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>
NAME: JEFFREY VERHOEF TITLE: President ADDRESS: 309 PARK PLACE CITY/ST/ZIP: NEWPORT NEWS, VA 23601-	NAME: Lindsey Carney Smith TITLE: President ADDRESS: 209 Hilton Terrace CITY/ST/ZIP: Newport News, VA 23601

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

Kathleen Deryder Kathleen Deryder, sec/treasurer 3-18-2022
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.

2022 ANNUAL REPORT CONTINUED

CORPORATION NAME:
 JAMES RIVER COUNTRY CLUB OF NEWPORT NEWS, INCORPORATED

DUE DATE: **04/30/22**
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7. DIRECTORS AND PRINCIPAL OFFICERS: (continued)

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<p align="center">OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> NAME: LINDSEY CARNEY SMITH TITLE: Vice President ADDRESS: 209 HILTON TERRACE CITY/ST/ZIP: NEWPORT NEWS, VA 23601-	<p align="center">OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/></p> NAME: John R. Lawson, II TITLE: Vice President ADDRESS: 1109 Riverside Drive CITY/ST/ZIP: Newport News, VA 23606
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
<p align="center">OFFICER <input checked="" type="checkbox"/> DIRECTOR <input type="checkbox"/></p> NAME: KATHLEEN N. DERYDER TITLE: SEC/TREAS ADDRESS: 127 SARAZEN COURT CITY/ST/ZIP: NEWPORT NEWS, VA 23602-0000	<p align="center">OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> NAME: TITLE: ADDRESS: CITY/ST/ZIP:
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<p align="center">OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> NAME: TITLE: ADDRESS: CITY/ST/ZIP:	<p align="center">OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/></p> NAME: TITLE: ADDRESS: CITY/ST/ZIP:
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