

**2013 ANNUAL REPORT**  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

21306.6954--4/5/2013

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213066954

1. CORPORATION NAME:  
FAIR OAKS LAND ACQUISITION GROUP INC., THE

DUE DATE: 04/30/13

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ATTY.  
THEODORE M GALANIDES

SCC ID NO.: 0693212-3

THEODORE M GALANIDES PC  
262 E WILLIAMSBURG RD  
SANDSTON, VA 23150

3. CITY OR COUNTY OF VA REGISTERED OFFICE:  
120-CHESTERFIELD COUNTY

4. STATE OR COUNTRY OF INCORPORATION:  
VA-VIRGINIA

5. STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

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: 9250 SUSQUEHANA TRAIL	ADDRESS:
CITY/ST/ZIP ASHLAND, VA 23005	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 checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: DONALD N MESSER	NAME:
TITLE: PRES/DIR	TITLE:
ADDRESS: 4213 NEW KENT HIGHWAY	ADDRESS:
CITY/ST/ZIP: QUINTON, VA 23141	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

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.

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CORPORATION NAME:  
FAIR OAKS LAND ACQUISITION GROUP INC., THE

DUE DATE: 04/30/13  
SCC ID NO.: 0693212-3



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 checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME:            TED C CONSTABLE TITLE:            SEC/DIRECTOR ADDRESS:        9250 SUSQUEHANNA TRAIL CITY/ST/ZIP:    ASHLAND, VA 23141	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 type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: TITLE: ADDRESS: CITY/ST/ZIP:	NAME: TITLE: ADDRESS: CITY/ST/ZIP:
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OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/>
NAME: TITLE: ADDRESS: CITY/ST/ZIP:	NAME: TITLE: ADDRESS: CITY/ST/ZIP:

