

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004726

FILED
Feb 12, 2009
Secretary of State

Entity Name: HARBOR GROUP MANAGEMENT CO. OF VIRGINIA

Current Principal Place of Business:

999 WATERSIDE DRIVE
SUITE 2300
NORFOLK, VA 23510 US

New Principal Place of Business:

Current Mailing Address:

999 WATERSIDE DRIVE
SUITE 2300
NORFOLK, VA 23510 US

New Mailing Address:

FEI Number: 54-1329081 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SLONE, JORDAN E
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA

Title: ST () Delete
Name: CHILDERS, E. ROBERT
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA

Title: PD () Delete
Name: FRIEDMAN, ROBERT S
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA 23510

Title: VP () Delete
Name: LITTON, T. RICHARD JR.
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA 23510

Title: T () Delete
Name: SCHAEFGEN, BRIAN
Address: 999 WATERSIDE DRIVE SUITE 2300
City-St-Zip: NORFOLK, VA 23510

Title: D () Delete
Name: SLONE, NORMAN R
Address: 999 WATERSIDE DRIVE SUITE 2300
City-St-Zip: NORFOLK, VA 23510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: SLONE, JORDAN E
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA 23510

Title: SD (X) Change () Addition
Name: CHILDERS, E. ROBERT
Address: 999 WATERSIDE DRIVE, STE 2300
City-St-Zip: NORFOLK, VA 23510

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORDAN E. SLONE

CD

02/12/2009

Electronic Signature of Signing Officer or Director

Date