2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000010494

Entity Name: VOA CREEKSIDE MANOR AH GP, INC.

Current Principal Place of Business:

1660 DUKE ST ALEXANDRIA, VA 22314

Current Mailing Address:

1660 DUKE ST ALEXANDRIA, VA 22314 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Apr 21, 2022 Secretary of State 5957453057CC

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	Т	Title	Р
Name	BURKS, JANE	Name	KING, MICHAEL
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	VC	Title	С
Name	RASE, NANCY	Name	ANDREINI ARNOLD, PATTI
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	AT/AS
Title Name	D CARRINGTON, EDWINA	Title Name	AT/AS KING, KIMBERLY
	-		
Name	CARRINGTON, EDWINA 1660 DUKE ST	Name	KING, KIMBERLY 1660 DUKE ST
Name Address City-State-Zip:	CARRINGTON, EDWINA 1660 DUKE ST ALEXANDRIA VA 22314	Name Address	KING, KIMBERLY 1660 DUKE ST
Name Address	CARRINGTON, EDWINA 1660 DUKE ST ALEXANDRIA VA 22314 AT/AS	Name Address City-State-Zip:	KING, KIMBERLY 1660 DUKE ST ALEXANDRIA VA 22314
Name Address City-State-Zip: Title	CARRINGTON, EDWINA 1660 DUKE ST ALEXANDRIA VA 22314	Name Address City-State-Zip: Title	KING, KIMBERLY 1660 DUKE ST ALEXANDRIA VA 22314 AT/AS
Name Address City-State-Zip: Title Name	CARRINGTON, EDWINA 1660 DUKE ST ALEXANDRIA VA 22314 AT/AS DESJARDINS, PETER 1660 DUKE ST	Name Address City-State-Zip: Title Name	KING, KIMBERLY 1660 DUKE ST ALEXANDRIA VA 22314 AT/AS WILSON-GENO, SHARON 1660 DUKE ST

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS DOLAN

SECRETARY

04/21/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title Name Address City-State-Zip: Title	AT/AS BUDZYNSKI, JOSEPH 1660 DUKE ST ALEXANDRIA VA 22314 AT/AS	Title Name Address City-State-Zip: Title	AT/AS GAVIN, NANCY 1660 DUKE ST ALEXANDRIA VA 22314 D
Name	NUTZ, FAITH	Name	BLOOM, SHAWN
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	S
Name	PERKINS, DERRICK	Name	DOLAN, THOMAS
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	D
Name	DALE, KAREN	Name	WAKEFIELD, STEPHEN
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	D
Name	LEBLANC, JAMES	Name	EDEBURN, ANDY
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	D
Name	KNAPP, KEITH	Name	PETERSEN, JEANNE
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314
Title	D	Title	
Name	MULLEN, BETH	Name	VIGILANCE, PIERRE
Address	1660 DUKE ST	Address	1660 DUKE ST
City-State-Zip:	ALEXANDRIA VA 22314	City-State-Zip:	ALEXANDRIA VA 22314