

1.) CORPORATION NAME:

**Encore Stage & Studio, Inc.**

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JASON TATE  
ENCORE STAGE & STUDIO  
3700 S FOUR MILE RUN DR**

SCC ID NO: **01075597**

5.) STOCK INFORMATION

|       |            |
|-------|------------|
| CLASS | AUTHORIZED |
|-------|------------|

**ARLINGTON, VA 22206**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ENCORE STAGE & STUDIO  
3700 S FOUR MILE RUN DR

CITY/ST/ZIP: ARLINGTON, VA 22206

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.

|                 |                      |                                  |  |
|-----------------|----------------------|----------------------------------|--|
| NAME:           | BETSY LOHMANN        | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR             |                                  |  |
| ADDRESS:        | 4005 FORT WORTH AVE  |                                  |  |
| CITY/ST/ZIP/CO: | ALEXANDRIA, VA 22304 |                                  |  |

|                 |                     |   |  |
|-----------------|---------------------|---|--|
| NAME:           | JERRY GIDNER        | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | PRESIDENT           |   |  |
| ADDRESS:        | 5854 N 26TH ST      |   |  |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22207 |   |  |

|                 |                     |   |  |
|-----------------|---------------------|---|--|
| NAME:           | JASON TATE          | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | TREASURER           |   |  |
| ADDRESS:        | 1406 N OHIO ST      |   |  |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 20005 |   |  |

|                 |                     |                                  |  |
|-----------------|---------------------|----------------------------------|--|
| NAME:           | CHRISTINE HAHN      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR            |                                  |  |
| ADDRESS:        | 3418 N RANDOLPH ST  |                                  |  |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22207 |                                  |  |

|                 |                        |                                  |  |
|-----------------|------------------------|----------------------------------|--|
| NAME:           | MELISSA HUSTON         | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR               |                                  |  |
| ADDRESS:        | 7206 ARTHUR DR         |                                  |  |
| CITY/ST/ZIP/CO: | FALLS CHURCH, VA 22046 |                                  |  |

|                 |                         |   |  |
|-----------------|-------------------------|---|--|
| NAME:           | GINA LODATO PELUSI      | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | SECRETARY               |   |  |
| ADDRESS:        | 5738 EVERGREEN KNOLL CT |   |  |
| CITY/ST/ZIP/CO: | ALEXANDRIA, VA 22303    |   |  |

|  |  |   |  |
|--|--|---|--|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JENNY REISING<br>DIRECTOR<br>5058 N 35TH RD<br>ARLINGTON, VA 22207         | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | MICHAEL ROLLIN<br>DIRECTOR<br>6123 11TH ST N<br>ARLINGTON, VA 22205        | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | ASHBY RUSHING<br>VICE PRESIDENT<br>3304 23RD ST N<br>ARLINGTON, VA 22201   | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | Josephine Diamond<br>DIRECTOR<br>5710 6th St N<br>ARLINGTON, VA 22205      | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | Renee McDonald<br>DIRECTOR<br>13325 Emeric Court<br>Centerville, VA 20120  | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | Jillian Poole<br>DIRECTOR<br>2016 N Westmoreland St<br>ARLINGTON, VA 22207 | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | Kate Thomas<br>DIRECTOR<br>1205 Bishopsgate Way<br>Reston, VA 20194        | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.  |  |   |  |
| /s/ JERRY GIDNER<br>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  | JERRY GIDNER, PRESIDENT<br>PRINTED NAME AND CORPORATE TITLE                | 2/19/2013<br>DATE                           |  |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. |  |   |  |