

1.) CORPORATION NAME:

RESTON INTERFAITH, INC.

DUE DATE: **2/29/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ERIC A WELTER
1141 ELDEN STREET
SUITE 220**

SCC ID NO: **01248210**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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HERNDON, VA 20170

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11150 SUNSET HILLS RD
STE 210

CITY/ST/ZIP: RESTON, VA 20190

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:	ALFRED GROFF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	IMM PST PRES		
ADDRESS:	885 CHINQUAPIN RD		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102		

NAME:	ANGELA HARPALANI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	11581 SOUTHLINGTON LANE		
CITY/ST/ZIP/CO:	HERNDON, VA 20170		

NAME:	JAMES T JUDGE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	11203 BRADBURY LANE		
CITY/ST/ZIP/CO:	RESTON, VA 20194-1311		

NAME:	KERRIE WILSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Recording Secy		
ADDRESS:	11150 SUNSET HILLS ROAD		
CITY/ST/ZIP/CO:	SUITE 210 RESTON, VA 20190		

NAME:	MR DAVID EHRHARDT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2015 HOMER TERRACE		
CITY/ST/ZIP/CO:	RESTON, VA 20191-1342		

NAME:	Barbara Gouldey	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1556 Trails Edge Lane		
CITY/ST/ZIP/CO:	Reston, VA 20194		

NAME:	Stuart Rakoff	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	12025 New Dominion Parkway		
CITY/ST/ZIP/CO:	Suite 302 Reston, VA 20190		

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/ KERRIE WILSON	KERRIE WILSON, Recording Secy	10/14/2012
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, 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.