

1.) CORPORATION NAME:

RESTON INTERFAITH, INC.

DUE DATE: **2/28/2013**

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:	STUART RAKOFF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	12025 NEW DOMINION PARKWAY SUITE 302		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

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:	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: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KERRIE WILSON RECORDING SECY 11150 SUNSET HILLS ROAD SUITE 210 RESTON, VA 20190	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MR DAVID EHRHARDT DIRECTOR 2015 HOMER TERRACE RESTON, VA 20191-1342	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Nancy Burk DIRECTOR 918 Monroe Street Herndon, VA 20170	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	William J Bush DIRECTOR 12613 Thunder Chase Drive Reston, VA 20191	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Georgia Graves DIRECTOR 45064 Underwood Lane Suite 100 Dulles, VA 20166	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gail Greenberg DIRECTOR 1385 Northgate Square REston, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Esther Johnson DIRECTOR 1333 Grant Street Herndon, VA 20170	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Susan Jones DIRECTOR 11583 Greenwich Road Reston, VA 20194	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sara Leonard DIRECTOR 10531 Hunter Station Road Vienna, VA 22181	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Linda Mallison DIRECTOR 1991 Logan Manor Drive Reston, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jill Norcross DIRECTOR 11956 Grey Squirrel Lane Reston, VA 20194	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	Stuart Patz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	46175 Westlake Drive		
CITY/ST/ZIP/CO:	Suite 400 Potomac Falls, VA 20165		
NAME:	Karyn Sandelman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11046 Thrush Ridge Road		
CITY/ST/ZIP/CO:	Reston, VA 20191		
NAME:	Barbara Schipper	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1645 Bentana Way		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Davood Sedaghatfar	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1577 Inlet Court		
CITY/ST/ZIP/CO:	Reston, VA 20170		
NAME:	Robert Simpson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8944 Jeffrey Road		
CITY/ST/ZIP/CO:	Great Falls, VA 20166		
NAME:	Francis Steinbauer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2501 Fowlers Lane		
CITY/ST/ZIP/CO:	Reston, VA 20191		
NAME:	James Vollmer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12804 Wrexham Rd.		
CITY/ST/ZIP/CO:	Oak Hill, VA 20171		
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	3/3/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECY	DATE	
	PRINTED NAME AND CORPORATE TITLE		
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.			