

1.) CORPORATION NAME:

**Liberty University, Inc.**

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DAVID M. CORRY  
1971 UNIVERSITY BLVD.  
LIBERTY UNIVERSITY**

SCC ID NO: **01360627**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**LYNCHBURG, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LYNCHBURG CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1971 UNIVERSITY BLVD

CITY/ST/ZIP: LYNCHBURG, VA 24502

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:	JERRY L. FALWELL JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO/CHANCELLOR		
ADDRESS:	1971 UNIVERSITY BLVD		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24502		
NAME:	DR RONALD S. GODWIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PROVOST/SR VP		
ADDRESS:	1971 UNIVERSITY BLVD		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24502		
NAME:	DAVID M. CORRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1971 UNIVERSITY BLVD		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24502		
NAME:	FLEET BROWNING	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	166 CYPRESS COURT		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-4586		
NAME:	TIM LEE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 461674		
CITY/ST/ZIP/CO:	GARLAND, TX 75046		
NAME:	DR. JERRY PREVO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6401 E. NORTHERN LIGHTS		
CITY/ST/ZIP/CO:	ANCHORAGE, AK 99504		

NAME: HARVEY GAINEY TITLE: DIRECTOR ADDRESS: 12419 JANSMA DRIVE CITY/ST/ZIP/CO: GRAND HAVEN, MI 49417	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: NEAL A. ASKEW TITLE: SR VP ADDRESS: 1971 UNIVERSITY BLVD CITY/ST/ZIP/CO: LYNCHBURG, VA 24502	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ DAVID M. CORRY	DAVID M. CORRY, SECRETARY	4/26/2013
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.