

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212536830

1.) CORPORATION NAME:

EVERY CITIZEN HAS OPPORTUNITIES, INC.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOHN A SHANTON
71 LAWSON RD SE
PO BOX 2277**

SCC ID NO: **01551217**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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LEESBURG, VA 20176

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 71 LAWSON ROAD SE

CITY/ST/ZIP: LEESBURG, VA 20175

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:	LAURRAINE LANDOLT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	38712 RICHARD ROAD		
CITY/ST/ZIP/CO:	LOVETTSVILLE, VA 20180		

NAME:	MILO ROBINSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1116 BRADFIELD DRIVE		
CITY/ST/ZIP/CO:	LEESBURG, VA 20175		

NAME:	CARROLL FRANKLIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	22711 HILLSIDE CIRCLE		
CITY/ST/ZIP/CO:	LEESBURG, VA 20175		

NAME:	CONNIE SUDDUETH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	142 BLUESPRUSE DR		
CITY/ST/ZIP/CO:	CHARLES TOWN, WV 25414		

NAME:	WILLIAM TERINGO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	105 LOUDOUN ST SW		
CITY/ST/ZIP/CO:	LEESBURG, VA 20175		

NAME:	ROY WEIDNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2 AMERSHAM CT		
CITY/ST/ZIP/CO:	STERLING, VA 20165		

NAME: ANN PILARTE TITLE: SECRETARY ADDRESS: 42980 CHESTERTON ST CITY/ST/ZIP/CO: ASHBURN, VA 20147	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JOAN GIPSON TITLE: DIRECTOR ADDRESS: 19255 LOUDOUN ORCHARD RD CITY/ST/ZIP/CO: LEESBURG, VA 20175	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JEAN O'MEARA TITLE: DIRECTOR ADDRESS: 52 N. REID ST. CITY/ST/ZIP/CO: HAMILTON, VA 20158	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: DAVID LUDWIG TITLE: DIRECTOR ADDRESS: 10186 PALE ROSE LOOP CITY/ST/ZIP/CO: BRISTOW, VA 20136	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: FRAN FRANKLIN TITLE: DIRECTOR ADDRESS: 22711 HILLSIDE CIRCLE CITY/ST/ZIP/CO: LEESBURG, VA 20175	<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/ LAURRAINE LANDOLT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LAURRAINE LANDOLT, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	9/25/2012 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.		