

1.) CORPORATION NAME:

LEISURE TIME RECREATION CENTERS, INCORPORATED

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DAVID A CALICO
3013 NUTLEY ST
FAIRFAX, VA**

SCC ID NO: **01620723**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000
PREFER	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
FAIRFAX CITY (FILED IN FAIRFAX COUNTY)

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3013 NUTLEY ST

CITY/ST/ZIP: FAIRFAX, VA 22031

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.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TARA ZIMNICK-CALICO	
TITLE:	PRESIDENT	
ADDRESS:	705 SOUTH LEE STREET	
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID CALICO	
TITLE:	VICE PRESIDENT	
ADDRESS:	705 SOUTH LEE STREET	
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KAREN ECKERT	
TITLE:	DIRECTOR	
ADDRESS:	11920 APPLING VALLEY RD	
CITY/ST/ZIP/CO:	FAIRFAX, VA 22030	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GEOFFREY SALINGER	
TITLE:	DIRECTOR	
ADDRESS:	1455 WATERFRONT RD	
CITY/ST/ZIP/CO:	RESTON, VA 20194	

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/ TARA ZIMNICK-CALICO	TARA ZIMNICK-CALICO,	9/14/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.