

1.) CORPORATION NAME:

MONTESSORI SCHOOL OF MCLEAN

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOAN MARIE PARASINE
1711 KIRBY ROAD
MCLEAN, VA**

SCC ID NO: **02066223**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1711 KIRBY RD

CITY/ST/ZIP: MCLEAN, VA 22101

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:	JOAN M PARASINE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	415 Sweet Hall Dr.		
CITY/ST/ZIP/CO:	Reedville, VA 22539		
NAME:	THOMAS R LEGRAND	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3413 HOLLY RD		
CITY/ST/ZIP/CO:	ANNANDALE, VA 22003		
NAME:	ROD BRANA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	7145 MERRIMAC DR		
CITY/ST/ZIP/CO:	MCLEAN, VA 22101		
NAME:	GEORGE DOUMAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2000 N 14TH STREET		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201		
NAME:	SARA RYCHENER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	618 faulkner street		
CITY/ST/ZIP/CO:	New Smyrna Beach, FL 32168		
NAME:	Christine Bianchine	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	7908 Birnam Wood Dr.		
CITY/ST/ZIP/CO:	McLean, VA 22102		

NAME: Robert Galbreath OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 8332 Old Dominion DR.
CITY/ST/ZIP/CO: Mclean, VA 22102

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.

<u>/s/ THOMAS R LEGRAND</u>	<u>THOMAS R LEGRAND, VICE</u>	<u>5/2/2014</u>
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.