

1.) CORPORATION NAME:

YOUTH FOR TOMORROW -- NEW LIFE CENTER, INC.

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C STEPHEN TEMPLETON
11835 HAZEL CIRCLE DR
BRISTOW, VA 20136**

SCC ID NO: **02486611**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

PRINCE WILLIAM COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11835 HAZEL CIRCLE DRIVE

CITY/ST/ZIP: BRISTOW, VA 20136

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:	GARY NAKAMOTO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1749 OLD MEADOW RD		
CITY/ST/ZIP/CO:	SUITE 500 MCLEAN, VA 22102		
NAME:	RON DEVINE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6320 AUGUSTA DR		
CITY/ST/ZIP/CO:	SUITE 1400 SPRINGFIELD, VA 22150		
NAME:	SUSAN LAPIERRE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	53 WARWICK STONE WAY		
CITY/ST/ZIP/CO:	GREAT FALLS, VA 22066		
NAME:	ROGER WEST	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1800 TYSONS BLVD		
CITY/ST/ZIP/CO:	PWC, LLP MCLEAN, VA 22102		
NAME:	JOE GIBBS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	13415 REESE BLVD W		
CITY/ST/ZIP/CO:	HUNTERSVILLE, NC 28078		
NAME:	GARY L JONES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	11835 HAZEL CIR CR		
CITY/ST/ZIP/CO:	BRISTOW, VA 20136		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID E LOOP COO 11835 HAZEL CIRCLE DR BRISTOW, VA 20136	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHAZA ANDERSON DIRECTOR 11636 PLAZA AMERICA DR RESTON, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CYNTHIA ATWATER DIRECTOR 11710 PLAZA AMERICA DR STE 2000 RESTON, VA 20190	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK BALTZ DIRECTOR 7500 OLD GEORGETOWN RD BETHESDA, MD 20814	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTHONY BARBOUR DIRECTOR PO BOX 7327 WOODBIDGE, VA 22195	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL BERQUIST DIRECTOR 10400 FERNWOOD ROAD BETHESDA, MD 20817	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TAYLOR CHESS DIRECTOR 12500 FAIR LAKES CIRCLE STE 400 FAIRFAX, VA 22033	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SEAN CONNOUGHTON DIRECTOR PO BOX 1475 SECY OF TRANSPORTATION RICHMOND, VA 23218	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM DAVIS DIRECTOR 1919 NORTH LYNN STREET ROSSLYN, VA 22298	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT DIX DIRECTOR 2251 CORPORATE PARK DR STE 100 HERNDON, VA 20171	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRUCE EBERLE DIRECTOR 1420 SPRING HILL RD STE 490 MCLEAN, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY GARCZYSKI DIRECTOR 13662 OFFICE PL STE 201B WOODBIDGE, VA 22192	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY ANN GHADBAN DIRECTOR 9401 BATTLE STREET MANASSAS, VA 20110	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM GIDDINGS DIRECTOR 14211 JEFFERSON DAVIS HWY WOODBIDGE, VA 22191	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIT HUME DIRECTOR 400 N. CAPITAL ST STE 550 WASHINGTON, DC 20001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD LARA DIRECTOR 7600 LEESBURG PIKE STE 120E FALLS CHURCH, VA 22043	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BARBARA LEWIS DIRECTOR 6849 OLD DOMINION DR STE 200 MCLEAN, VA 22101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY MICHAEL DIRECTOR 21300 REDSKINS PARK DRIVE ASHBURN, VA 20147	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	OLIVER NORTH DIRECTOR 22570 MARKEY COURT STERLING, VA 20166	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BURKE O'MALLEY DIRECTOR 46980 HARRY BYRD HWY STERLING, VA 20176	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NANCY PADGETT DIRECTOR 10412 BRECKENRIDGE LANE FAIRFAX, VA 22030	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JON PETERSON DIRECTOR 12500 FAIR LAKES CIR, STE 400 FAIRFAX, VA 22030	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY ROSENTHAL DIRECTOR 9265 CORPORATE CIRCLE MANASSAS, VA 20110	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAN SIPE DIRECTOR 15245 SHADY GROVE ROAD ROCKVILLE, MD 20850	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY SMIST DIRECTOR 1612 FIELDING LEWIS WAY MCLEAN, VA 22101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVE TEMPLETON DIRECTOR 2531 CHAIN BRIDGE RD VIENNA, VA 22180	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS TOTH DIRECTOR 608 SOUTH KING ST LEESBURG, VA 20175	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTHA VOSS DIRECTOR 601 THIRTEENTH ST NW STE 910S WASHINGTON, DC 20005	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REBECCA WHITELOCK DIRECTOR 4275 BROAD RUN CHURCH RD WARRENTON, VA 20187	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JUAN WILLIAMS DIRECTOR 635 MASSACHUSETTS AVE, NW NRP WASHINGTON, DC 20001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY L JONES DIRECTOR 9214 CENTER STREET MANASSAS, VA 20110	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD NORMAN DIRECTOR 44084 RIVERSIDE PARKEAY STE 350 LANSDOWNE, VA 20176	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	W VERNON MCHARGUE DIRECTOR 15437 DUCKLING PLACE WOODBIDGE, VA 22191	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICTOR SELLIER DIRECTOR 3 CLARKS BRANCH ROAD GREAT FALLS, VA 22066	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM SHUMAKER DIRECTOR 2355 DULLES CORNER BLVD STE 501 HERNDON, VA 20171	<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/ GARY NAKAMOTO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	GARY NAKAMOTO, PRESIDENT PRINTED NAME AND CORPORATE TITLE	10/17/2012 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.			