

1.) CORPORATION NAME: **NORTHERN VIRGINIA COUNTRY-WESTERN DANCEASSOCIATION, INC.** DUE DATE: **10/31/2013**  
 SCC ID NO: **03104346**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **WILLIAM WONG**  
**2424 FALLS PLACE CT**  
**FALLS CHURCH, VA** 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: PO BOX 384  
 CITY/ST/ZIP: MERRIFIELD, VA 22116-0384

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: Richard Humbert TITLE: PRESIDENT ADDRESS: 5465 N Morgan St #302 CITY/ST/ZIP/CO: Alexandria, VA 22312-3326	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: Eileen Scott TITLE: VICE PRESIDENT ADDRESS: 166 Normandy Hill Dr CITY/ST/ZIP/CO: Alexandria, VA 22304-6320	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: William Wong TITLE: TREASURER ADDRESS: 2424 Falls Place Ct CITY/ST/ZIP/CO: Falls Church, VA 22043-3009	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: Irshad Ali TITLE: SECRETARY ADDRESS: 16837 Four Seasons Dr CITY/ST/ZIP/CO: Dumfries, VA 22025-1838	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: Kathy Fanelli TITLE: DIRECTOR ADDRESS: 4948 Andrea Ave CITY/ST/ZIP/CO: Annandale, VA 22003	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: Kerie Hitt TITLE: DIRECTOR ADDRESS: 2079 Cobblestone Lane CITY/ST/ZIP/CO: Reston, VA 20191-4039	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Luella Montgomery DIRECTOR 5909 Brookland Rd Alexandria, VA 22310-1810	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Eric Vondra DIRECTOR 104 Cardinal Glen Circle Sterling, VA 20164-5501	<input 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/ William Wong	William Wong, TREASURER	8/25/2013
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.