

1.) CORPORATION NAME:

DUE DATE: **10/31/2011**

RE/MAX Central Atlantic Region Promotional Fund, Inc.

SCC ID NO: **03110590**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5075 S SYRACUSE ST

CITY/ST/ZIP: DENVER, CO 80237-

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: GAIL A LINIGER
TITLE: PRESIDENT
ADDRESS: 5075 S SYRACUSE ST
CITY/ST/ZIP/CO: DENVER, CO 80237-

OFFICER

DIRECTOR

NAME: BRUCE A BENHAM
TITLE: VP/T/SEC
ADDRESS: 5075 S SYRACUSE ST
CITY/ST/ZIP/CO: DENVER, CO 80237-

OFFICER

DIRECTOR

NAME: DAVID L LINIGER
TITLE: DIRECTOR
ADDRESS: 5075 S SYRACUSE ST
CITY/ST/ZIP/CO: DENVER, CO 80237-

OFFICER

DIRECTOR

NAME: GEOFFREY D. LEWIS
TITLE: SECRETARY
ADDRESS: 5075 S. SYRACUSE ST
CITY/ST/ZIP/CO: DENVER, CO 80237-

OFFICER

DIRECTOR

NAME: GARY WEIL
TITLE: ASST SECRETARY
ADDRESS: 5075 S. SYRACUSE ST
CITY/ST/ZIP/CO: DENVER, CO 80237-

OFFICER

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 WEIL	GARY WEIL, ASST SECRETARY	10/12/2011
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.		