

1.) CORPORATION NAME:

**THE LOUDOUN LITERACY COUNCIL, INC.**

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LAWRENCE M SCHONBERGER  
SEVILA SAUNDERS ET AL  
30 N KING ST**

SCC ID NO: **03162054**

5.) STOCK INFORMATION

|       |            |
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| CLASS | AUTHORIZED |
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**LEESBURG, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LOUDOUN COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 1932

CITY/ST/ZIP: LEESBURG, VA 20177-1932

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.

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|---|---|--|
| NAME: SEAN JORDAN<br>TITLE: PRESIDENT<br>ADDRESS: 173 Sulgrave Court<br>CITY/ST/ZIP/CO: Sterling, VA 20165          | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: BETH DAVIDSON<br>TITLE: SECRETARY<br>ADDRESS: 22411 DINAH PLACE<br>CITY/ST/ZIP/CO: LEESBURG, VA 20175         | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: DAVID BRUCE<br>TITLE: VICE PRESIDENT<br>ADDRESS: 18793 UPPER MEADOW DR<br>CITY/ST/ZIP/CO: LEESBURG, VA 20176  | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: LESLIE MAZESKA<br>TITLE: DIRECTOR<br>ADDRESS: PO BOX 1932<br>CITY/ST/ZIP/CO: LEESBURG, VA 20177               | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Bob Venezia<br>TITLE: TREASURER<br>ADDRESS: 43708 Red House Drive<br>CITY/ST/ZIP/CO: Lansdowne, VA 20176      | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Kathy Sebuck<br>TITLE: DIRECTOR<br>ADDRESS: 19203 Kepharts Mill Terrace<br>CITY/ST/ZIP/CO: Leesburg, VA 20176 | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |

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| NAME: Paul Levi<br>TITLE: DIRECTOR<br>ADDRESS: 1710 SAIC Drive<br>CITY/ST/ZIP/CO: Tysons, VA 22102   | <input type="checkbox"/> OFFICER                             | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Matt Nieman<br>TITLE: DIRECTOR<br>ADDRESS: 10701 Parkridge Blvd, Ste. 300<br>CITY/ST/ZIP/CO: Reston, VA 20191  | <input type="checkbox"/> OFFICER                             | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: James Hubler<br>TITLE: DIRECTOR<br>ADDRESS: 12061 Bluemont Way<br>CITY/ST/ZIP/CO: Reston, VA 20190   | <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/ LESLIE MAZESKA<br>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT  | LESLIE MAZESKA, DIRECTOR<br>PRINTED NAME AND CORPORATE TITLE | 2/24/2014<br>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. |  |  |