

1.) CORPORATION NAME:

SACRED SPACE FOUNDATION

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**INCORP SERVICES, INC.
7288 HANOVER GREEN DRIVE
MECHANICSVILLE, VA 23111**

SCC ID NO: **03842507**

5.) STOCK INFORMATION

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

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. Box 4846

CITY/ST/ZIP: Silver Spring, MD 20914

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:	CAROLINE KENNER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12806 GAFFNEY ROAD		
CITY/ST/ZIP/CO:	SILVER SPRING, MD 20904		

NAME:	GWENDOLYN REECE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1660 LANIER PL #507		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009		

NAME:	MICHAEL SMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15796 ENCHANTED WAY		
CITY/ST/ZIP/CO:	GEORGETOWN, DE 19947		

NAME:	Kathy Doran	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	257 Mohegan Drive		
CITY/ST/ZIP/CO:	Havre de Grace, VA 21078		

NAME:	Annie Large	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	31643 Peggy Neck Road		
CITY/ST/ZIP/CO:	Princess Anne, MD 21853		

NAME:	Alex Carr-Davis	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 603		
CITY/ST/ZIP/CO:	Frederica, DE 19946		

NAME:	David Rea	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4 Shawnee Court		
CITY/ST/ZIP/CO:	Apt. 102 Parkville, MD 21234		

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/ GWENDOLYN REECE	GWENDOLYN REECE, DIRECTOR	11/1/2012
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.