

1.) CORPORATION NAME: <b>B. F. Behan, Inc.</b>	DUE DATE: <b>1/31/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>BARRY F BEHAN 14501 COVE MOUNTAIN CT HAYMARKET, VA</b>	SCC ID NO: <b>04029021</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>PRINCE WILLIAM COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10437 BALLS FORD RD  
CITY/ST/ZIP: MANASSAS, VA 20109

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BARRY FRANCIS BEHAN		
TITLE: PRESIDENT		
ADDRESS: 14501 COVE MOUNTAIN CT		
CITY/ST/ZIP/CO: HAYMARKET, VA 20169		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PETER GARFIELD SLEIGHT		
TITLE: VP/CFO		
ADDRESS: 1 WHITE DEER LANE		
CITY/ST/ZIP/CO: PALM COAST, FL 32164		

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/ PETER GARFIELD SLEIGHT	PETER GARFIELD SLEIGHT, VP/CFO	11/29/2013
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.