

1.) CORPORATION NAME: NATIONAL LEARNING INSTITUTE	DUE DATE: 11/30/2015
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GERALD M. CROAN 4201 WILSON BOULEVARD, SUITE 110-301 ARLINGTON, VA	SCC ID NO: 04565263
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ARLINGTON COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4201 WILSON BLVD
SUITE 110-301

CITY/ST/ZIP: ARLINGTON, VA 22203

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: GERALD M CROAN	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRES/SEC				
ADDRESS: 5144 PLEASANT FOREST DR				
CITY/ST/ZIP/CO: CENTREVILLE, VA 20120				

NAME: MARGERY SHER	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: VP/TREAS				
ADDRESS: 1230 23RD ST NW #710				
CITY/ST/ZIP/CO: WASHINGTON, DC 20037				

NAME: GARY L BOWEN	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 117 LIONSGATE DR				
CITY/ST/ZIP/CO: CARY, NC 27517				

NAME: DIANNE PHILIBOSIAN, PH. D.	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 436 SOUTH ARROYO BLVD				
CITY/ST/ZIP/CO: PASADENA, CA 91105				

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/ GERALD M CROAN	GERALD M CROAN, PRES/SEC	10/8/2015
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.