

1.) CORPORATION NAME:

**ALLIANCE FRANCAISE, CHAPITRE DE GRASSE**

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ALISA BEAROV LANDRUM  
630 SHIRLEY AVENUE  
NORFOLK, VA**

SCC ID NO: **04782306**

5.) STOCK INFORMATION

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

**NORFOLK CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 222 W 21ST STREET  
SUITE F-313

CITY/ST/ZIP: NORFOLK, VA 23517

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: JEAN GULICK TITLE: PRESIDENT ADDRESS: 222 W. 21ST ST. BOX F-313 NORFOLK, VA 23517 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NICOLAS VALCOUR TITLE: TREASURER ADDRESS: 222 W. 21st. St. Box F-313 NORFOLK, VA 23517 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: FRIEDA PARR GURAN TITLE: DIRECTOR ADDRESS: 222 W. 21ST ST. BOX F-313 NORFOLK, VA 23517 CITY/ST/ZIP/CO:	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALISA BEAROV LANDRUM TITLE: DIRECTOR ADDRESS: 630 SHIRLEY AVENUE NORFOLK, VA 23517 CITY/ST/ZIP/CO:	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LUDOVIC FREQUELIN TITLE: VICE PRESIDENT ADDRESS: 222 W. 21st. St. Box F-313 Norfolk, VA 23517 CITY/ST/ZIP/CO:	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	ANNE CHEMALI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	222 W. 21st. St.		
CITY/ST/ZIP/CO:	Box F-313 Norfolk, VA 23517		

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/ ALISA BEAROV LANDRUM	ALISA BEAROV LANDRUM,	1/16/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DIRECTOR	DATE
	PRINTED NAME AND CORPORATE TITLE	

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.