

1.) CORPORATION NAME: HURRICANE CHARTER SERVICES, INC.	DUE DATE: 3/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JOHN L DEMARIA 7215 SYDENSTRICKER RD SPRINGFIELD, VA	SCC ID NO: 04813507				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	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>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 7215 SYDENSTRICKER ROAD CITY/ST/ZIP: SPRINGFIELD, VA 22152	
---	--

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: JOHN DEMARIA TITLE: PRESIDENT ADDRESS: 7215 SYDENSTRICKER ROAD CITY/ST/ZIP/CO: SPRINGFIELD, VA 22152	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
---	-------------------------------------	---------	-------------------------------------	----------

NAME: DEBRA DEMARIA TITLE: OFFICER ADDRESS: 7215 SYDENSTRICKER ROAD CITY/ST/ZIP/CO: SPRINGFIELD, VA 22152	<input checked="" type="checkbox"/>	OFFICER	<input 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/ JOHN DEMARIA	JOHN DEMARIA, PRESIDENT	3/1/2015
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.