

1.) CORPORATION NAME:

College Parents of America

DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PARACORP INCORPORATED
12610 LAKE NORMANDY LANE
FAIRFAX, VA 22030-7251**

SCC ID NO: **04819561**

5.) STOCK INFORMATION

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

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2200 WILSON BOULEVARD
SUITE #102

CITY/ST/ZIP: ARLINGTON, VA 22201

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.

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|---|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: GUY ROLL | | |
| TITLE: SECRETARY | | |
| ADDRESS: 40 NORTH CENTRAL AVE | | |
| CITY/ST/ZIP/CO: STE 1400 PHOENIX, AZ 85004 | | |

| | | |
|--|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ROBERT SOZA | | |
| TITLE: CHAIRMAN | | |
| ADDRESS: 2200 Wilson Boulevard | | |
| CITY/ST/ZIP/CO: Suite 102 Arlington, VA 22201 | | |

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|--|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JOHN T FEES | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 2200 Wilson Boulevard | | |
| CITY/ST/ZIP/CO: Suite 102 Arlington, VA 22201 | | |

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| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: William Suneson | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 2200 Wilson Boulevard | | |
| CITY/ST/ZIP/CO: Suite 102 Arlington, VA 22201 | | |

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|--|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: Lisa Beggs | | |
| TITLE: TREASURER | | |
| ADDRESS: 2200 Wilson Boulevard | | |
| CITY/ST/ZIP/CO: Suite 102 Arlington, VA 22201 | | |

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.

| | | |
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| /s/ GUY ROLL | GUY ROLL, | 4/18/2012 |
| 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. | | |