

1.) CORPORATION NAME:

NUEVA ESPERANZA

DUE DATE: **7/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LIDA MAURER
5412 CHATHAM LAKE DRIVE
VIRGINIA BEACH, VA**

SCC ID NO: **05432695**

5.) STOCK INFORMATION

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

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5412 CHATHAM LAKE DRIVE

CITY/ST/ZIP: VIRGINIA BEACH, VA 23464

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 type="checkbox"/> DIRECTOR
NAME:	BARBARA MAURER DE BARAHONA	
TITLE:	PRESIDENT	
ADDRESS:	APDO 4118	
CITY/ST/ZIP/CO:	, , FN	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LIDA MAURER	
TITLE:	TREASURER	
ADDRESS:	3695 RT 84	
CITY/ST/ZIP/CO:	KINGSVILLE, OH 44048	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SAMUEL RING	
TITLE:	SECRETARY	
ADDRESS:	PO BOX 85	
CITY/ST/ZIP/CO:	EAST SPRINGFIELD, PA 16411	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TERRY DAVIS	
TITLE:	DIRECTOR	
ADDRESS:	275 THORNBURG ROAD	
CITY/ST/ZIP/CO:	DALLAS, NC 28034	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TOM GILBERT	
TITLE:	DIRECTOR	
ADDRESS:	56 HAMPTON PLACE	
CITY/ST/ZIP/CO:	WALKERSVILLE, MD 21793	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHAD GUST	
TITLE:	DIRECTOR	
ADDRESS:	796 DEER RIDGE ROAD	
CITY/ST/ZIP/CO:	RUTLEDGE, TN 37861	

NAME: Bonita Jones TITLE: DIRECTOR ADDRESS: 239 Coralstone Drive CITY/ST/ZIP/CO: Fort Mill, SC 29708	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Donna Perry TITLE: DIRECTOR ADDRESS: 1410 Barbara Drive CITY/ST/ZIP/CO: Cherryville, NC 28021	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ LIDA MAURER	LIDA MAURER, TREASURER	6/27/2014
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.