

1.) CORPORATION NAME:

CWC Gift Card Co.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

SCC ID NO: **05731146**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 999 LAKE DRIVE

CITY/ST/ZIP: ISSAQUAH, WA 98027

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.

<p>NAME: JOSEPH PORTERA TITLE: PRESIDENT ADDRESS: 45940 HORSESHOE DRIVE CITY/ST/ZIP/CO: STERLING, VA 20166</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JOEL BENOLIEL TITLE: VICE PRESIDENT ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: PAUL WILLIAM LATHAM TITLE: VICE PRESIDENT ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: HAROLD ELLIOT KAPLAN TITLE: TREASURER ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: RICHARD JAMES OLIN TITLE: ASST SECRETARY ADDRESS: 999 LAKE DRIVE CITY/ST/ZIP/CO: ISSAQUAH, WA 98027</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Margaret E McCulla TITLE: SECRETARY ADDRESS: 45940 Horseshoe Drive CITY/ST/ZIP/CO: Sterling, VA 20166</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: Gail Ellen Tsuboi TITLE: ASST SECRETARY ADDRESS: 999 Lake Drive CITY/ST/ZIP/CO: Issaquah, WA 98027	<input checked="" type="checkbox"/> OFFICER	<input 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/ Gail EllenTsuboi	Gail EllenTsuboi,	1/9/2013
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.