

1.) CORPORATION NAME: **CANINE RESCUE & ADOPTION PROGRAM, INC.** DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **GENEVIEVE W JONES** SCC ID NO: **05835327**

**13340 STONEWALL JACKSON RD  
WOODFORD, VA**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:  
**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 13340 STONEWALL JACKSON ROAD  
CITY/ST/ZIP: WOODFORD, VA 22580

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 checked="" type="checkbox"/> DIRECTOR
NAME:	GENEVIEVE M WICKOWSKI	
TITLE:	DIR/PRES	
ADDRESS:	13340 STONEWALL JACKSON RD	
CITY/ST/ZIP/CO:	WOODFORD, VA 22580	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DANIEL K JONES	
TITLE:	VICE PRESIDENT	
ADDRESS:	13340 STONEWALL JACKSON RD	
CITY/ST/ZIP/CO:	WOODFORD, VA 22580	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOSEPH MASSEY	
TITLE:	BOARD MEMBER	
ADDRESS:	125 LOOP ROAD	
CITY/ST/ZIP/CO:	HURLBURT FIELD, FL 23544	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KATHLEEN PHILPOT	
TITLE:	BOARD MEMBER	
ADDRESS:	103 JONNY CAKE COURT	
CITY/ST/ZIP/CO:	STAFFORD, VA 22554	

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/ GENEVIEVE M WICKOWSKI	GENEVIEVE M WICKOWSKI,	7/25/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DIR/PRES 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.