

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214539086				
1.) CORPORATION NAME: <b>CnL Enterprises, Inc.</b>		DUE DATE: <b>8/31/2014</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>RANDOLPH D FROSTICK 9200 CHURCH ST STE 400 MANASSAS, VA</b>		SCC ID NO: <b>06218481</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>MANASSAS CITY (FILED IN PRINCE WILLIAM COUNTY)</b>		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: <b>VA</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 8009 CLIFTON ST  CITY/ST/ZIP: MANASSAS, VA 20109						
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: CATHERINE A ROBINSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
TITLE: P/T						
ADDRESS: 8009 CLIFTON ST						
CITY/ST/ZIP/CO: MANASSAS, VA 20109						
NAME: ANDREW L ROBINSON JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
TITLE: SECRETARY						
ADDRESS: 8009 CLIFTON ST						
CITY/ST/ZIP/CO: MANASSAS, VA 20109						
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/ CATHERINE A ROBINSON	CATHERINE A ROBINSON, P/T	8/12/2014				
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.						