

1.) CORPORATION NAME:

Haiti Micah Project, Inc.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOSEPH M CONSTANT
3606 SEMINARY RD
ALEXANDRIA, VA**

SCC ID NO: **06367924**

5.) STOCK INFORMATION

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

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3606 SEMINARY ROAD

CITY/ST/ZIP: ALEXANDRIA, VA 22304

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:	JOSEPH M CONSTANT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	821 FONTAINE STREET		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22302		

NAME:	WILLIAM TACZAK JR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5384 STRAWBERRY LANE		
CITY/ST/ZIP/CO:	KING GEORGE, VA 22485		

NAME:	RUTH QUARTEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Secretary		
ADDRESS:	16134 EDENWOOD DR		
CITY/ST/ZIP/CO:	BOWIE, MD 20716		

NAME:	JAMES SNOW	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1417 KEY DRIVE		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22302		

NAME:	NANA RUDOLPH STEWART III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7 Poplar Pt Rd		
CITY/ST/ZIP/CO:	Edgewater, MD 21037		

NAME:	Sarah Bushman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	528 U Street, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20001		

NAME: Richard Frazer TITLE: DIRECTOR ADDRESS: 5434 Strawberry Lane CITY/ST/ZIP/CO: King George, VA 22485	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Karen Wires TITLE: DIRECTOR ADDRESS: 4900 English Drive CITY/ST/ZIP/CO: Annandale, VA 22003	<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/ JAMES SNOW	JAMES SNOW, TREASURER	2/23/2014
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.