

1.) CORPORATION NAME:

OPEI Education and Research Foundation, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
JEAN HAWES
341 SOUTH PATRICK STREET
ALEXANDRIA, VA 22314**

DUE DATE: **5/31/2012**

SCC ID NO: **06381271**

5.) STOCK INFORMATION

| | |
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| 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: 341 S PATRICK ST

CITY/ST/ZIP: ALEXANDRIA, VA 22314-

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: MICHAEL HOFFMAN
TITLE: CHAIRMAN/S/T
ADDRESS: 8111 LYNDALE AVE SO
CITY/ST/ZIP/CO: BLOOMINGTON, MN 55420-

OFFICER DIRECTOR

NAME: STEVEN M BLY
TITLE: V CHAIRMAN
ADDRESS: 400 OAKWOOD RD
CITY/ST/ZIP/CO: LAKE ZURICH, IL 60047-

OFFICER DIRECTOR

NAME: KRIS R KISER
TITLE: PRESIDENT
ADDRESS: 341 S PATRICK ST
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314-

OFFICER DIRECTOR

NAME: DANIEL T ARIENS
TITLE: DIRECTOR
ADDRESS: 655 WEST RYAN ST
CITY/ST/ZIP/CO: BRILLION, WI 54110-

OFFICER DIRECTOR

NAME: JEAN HAWES
TITLE: ASST SECRETARY
ADDRESS: 341 S PATRICK STREET
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314-

OFFICER DIRECTOR

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.

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|---|-----------------------------------|------------------|
| <u>/s/ JEAN HAWES</u> | <u>JEAN HAWES, ASST SECRETARY</u> | <u>3/16/2012</u> |
| 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.