

1.) CORPORATION NAME:

**SPIRITUAL ASSEMBLY OF THE BAHA'IS OF  
FAIRFAXCOUNTY EAST**

DUE DATE: **7/31/2011**

SCC ID NO: **06413413**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY  
JON E TREVATHAN  
8345 OPAL RD  
WARRENTON, VA 20186**

5.) STOCK INFORMATION

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

**FAUQUIER COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 1861

CITY/ST/ZIP: ANNANDALE, VA 22003-

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: CYNTHIA G MCDANIEL  
TITLE: SECRETARY  
ADDRESS: PO BOX 1861  
CITY/ST/ZIP/CO: ANNANDALE, VA 22003-

OFFICER  DIRECTOR

NAME: TECK CHUA  
TITLE: TREASURER  
ADDRESS: PO BOX 1861  
CITY/ST/ZIP/CO: ANNANDALE, VA -

OFFICER  DIRECTOR

NAME: HAIDEH SABET  
TITLE: CHAIR  
ADDRESS: PO BOX 1861  
CITY/ST/ZIP/CO: ANNANDALE, VA 22003-

OFFICER  DIRECTOR

NAME: PORTIA MITTLEMAN  
TITLE: DIRECTOR  
ADDRESS: PO BOX 1861  
CITY/ST/ZIP/CO: ANNANDALE, VA 22003-

OFFICER  DIRECTOR

NAME: ANTHONY N. VANCE  
TITLE: VICE CHAIRMAN  
ADDRESS: P.O. BOX 1861  
CITY/ST/ZIP/CO: ANNANDALE, VA 22003-

OFFICER  DIRECTOR

NAME: NURIL KINGSLEY TITLE: DIRECTOR ADDRESS: P.O. BOX 1861 CITY/ST/ZIP/CO: ANNANDALE, VA 22003-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: SINA SABET TITLE: DIRECTOR ADDRESS: P.O. BOX 1861 CITY/ST/ZIP/CO: ANNANDALE, VA 22003-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: BURMA KLEIN TITLE: DIRECTOR ADDRESS: P.O. BOX 1861 CITY/ST/ZIP/CO: ANNANDALE, VA 22003-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JULIA BADALIANCE TITLE: DIRECTOR ADDRESS: P.O. BOX 1861 CITY/ST/ZIP/CO: ANNANDALE, VA 22003-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> 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.	
/s/ CYNTHIA G MCDANIEL _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CYNTHIA G MCDANIEL, SECRETARY _____ PRINTED NAME AND CORPORATE TITLE
7/20/2011 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.	