

1.) CORPORATION NAME:

AFRAME DIGITAL, INC.

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

SCC ID NO: **06625974**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
CINDY A CRUMP
40272 HIDDEN HEIGHTS LN
LOVETTSVILLE, VA 20180**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 40272 HIDDEN HEIGHTS LANE

CITY/ST/ZIP: LOVETTSVILLE, VA 20180-

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: CINDY A CRUMP
TITLE: PRESIDENT
ADDRESS: 40272 HIDDEN HEIGHTS LN
CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180-

OFFICER

DIRECTOR

NAME: BRUCE WILSON
TITLE: TREASURER
ADDRESS: 40272 HIDDEN HEIGHTS LANE
CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180-

OFFICER

DIRECTOR

NAME: PATRICK FARRELL
TITLE: SECRETARY
ADDRESS: 40272 HIDDEN HEIGHTS LANE
CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180-

OFFICER

DIRECTOR

NAME: GERALD MCNICHOLS
TITLE: CHAIRMAN
ADDRESS: 40272 HIDDEN HEIGHTS LANE
CITY/ST/ZIP/CO: LOVETTSVILLE, VA 20180-

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.

/s/ BRUCE WILSON

BRUCE WILSON, TREASURER

7/14/2011

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.