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| 1.) CORPORATION NAME:<br><b>Greater Stafford Church of Christ</b>  | DUE DATE: <b>9/30/2012</b>  |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CURTIS FIELDS<br/>15800 MONCURE DR<br/>DUMFRIES, VA 22025</b> | SCC ID NO: <b>06838098</b>  |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>PRINCE WILLIAM COUNTY</b>  | 5.) STOCK INFORMATION<br>CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>  |   |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3704 DALEBROOK DRIVE

CITY/ST/ZIP: DUMFRIES, VA 22025

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: CURTIS FIELDS                | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: TREASURER                   |                                     |         |                                     |          |
| ADDRESS: 15800 MONCURE DRIVE       |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: DUMFRIES, VA 22025 |                                     |         |                                     |          |

|  |                                     |         |                                     |          |
|--|-------------------------------------|---------|-------------------------------------|----------|
| NAME: PATRICK OLIVAREZ                   | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: BOARD CHAIRMAN                    |                                     |         |                                     |          |
| ADDRESS: 12009 WHEATON ROAD              |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22409 |                                     |         |                                     |          |

|                                    |                                     |         |                                     |          |
|------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: DONNIE EVERSON               | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: SECRETARY                   |                                     |         |                                     |          |
| ADDRESS: 129 IVYWOOD DRIVE         |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: STAFFORD, VA 22554 |                                     |         |                                     |          |

|                                    |                                     |         |                                     |          |
|------------------------------------|-------------------------------------|---------|-------------------------------------|----------|
| NAME: Matthew Esmacher             | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: VICE CHAIRMAN               |                                     |         |                                     |          |
| ADDRESS: 15537 Windward Ct.        |                                     |         |                                     |          |
| CITY/ST/ZIP/CO: Dumfries, VA 22025 |                                     |         |                                     |          |

|                                      |                          |         |                                     |          |
|--------------------------------------|--------------------------|---------|-------------------------------------|----------|
| NAME: Patrick Jones                  | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| TITLE: DIRECTOR                      |                          |         |                                     |          |
| ADDRESS: 13100 Kurtz Road            |                          |         |                                     |          |
| CITY/ST/ZIP/CO: Woodbridge, VA 22193 |                          |         |                                     |          |

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/ PATRICK OLIVAREZ                                | PATRICK OLIVAREZ, BOARD                      | 10/23/2012 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | CHAIRMAN<br>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.