

1.) CORPORATION NAME: Brookfield Civic Association	DUE DATE: 4/30/2016
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SAMUEL HILL BESALEL 4201 KINCAID CT CHANTILLY, VA	SCC ID NO: 06928584
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: PO BOX 222582 CITY/ST/ZIP: CHANTILLY, VA 20153-2582	
--	--

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: SAMUEL BESALEL TITLE: PRESIDENT ADDRESS: 4201 KINCAID CT CITY/ST/ZIP/CO: CHANTILLY, VA 20151	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JAMES ROLLINS TITLE: VICE PRESIDENT ADDRESS: 13602 BENTREE COURT CITY/ST/ZIP/CO: CHANTILLY, VA 20151	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: SHELLEY LEEDS TITLE: TREASURER ADDRESS: 4055 CARBURY COURT CITY/ST/ZIP/CO: CHANTILLY, VA 20151	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: LARRY LEEDS TITLE: DIRECTOR ADDRESS: 4055 CARBURY COURT CITY/ST/ZIP/CO: CHANTILLY, VA 20151	<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/ SAMUEL BESALEL	SAMUEL BESALEL, PRESIDENT	4/17/2016
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.