

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213516105

1.) CORPORATION NAME:

Veterans' Hope

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **07082969**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1717 PENNSYLVANIA AVENUE NW

CITY/ST/ZIP: WASHINGTON, DC 20006

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:	JONO IGLESIAS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1717 PENNSYLVANIA AVENUE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20006		

NAME:	RILEY D DODDS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1717 PENNSYLVANIA AVENUE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20006		

NAME:	AL ZEITNER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	11091 MEADS LOOP		
CITY/ST/ZIP/CO:	ORANGE PARK ACRES, CA 92808		

NAME:	CHRISTOPHER BENGUHE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	18100 VON KARMAN AVENUE		
CITY/ST/ZIP/CO:	IRVINE, CA 92612		

NAME:	BRIAN JOHNSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	18100 VON KARMAN AVENUE		
CITY/ST/ZIP/CO:	IRVINE, CA 92612		

NAME:	MARK A SERKEZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1316 LAKE SHORE DRIVE		
CITY/ST/ZIP/CO:	ORLANDO, FL 32803		

NAME: MICHAEL L SLEE TITLE: DIRECTOR ADDRESS: 18100 VON KARMAN AVENUE CITY/ST/ZIP/CO: IRVINE, CA 92612	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BRANDON S ZEITNER TITLE: DIRECTOR ADDRESS: 1717 PENNSYLVANIA AVENUE NW CITY/ST/ZIP/CO: WASHINGTON, DC 20006	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: RYAN WATTS TITLE: DIRECTOR ADDRESS: 1316 LAKE SHORE DRIVE CITY/ST/ZIP/CO: ORLANDO, FL 32803	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ALBERT COLEY TITLE: DIRECTOR ADDRESS: 1316 LAKE SHORE DRIVE CITY/ST/ZIP/CO: ORLANDO, FL 32803	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: ASHLEY VAN DYKE TITLE: DIRECTOR ADDRESS: 18100 VON KARMAN AVENUE CITY/ST/ZIP/CO: IRVINE, CA 92612	<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/ AL ZEITNER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	AL ZEITNER, CHAIRMAN PRINTED NAME AND CORPORATE TITLE	3/31/2013 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.		