

1.) CORPORATION NAME:

TKE Mu Omega Alumni Association, Inc.

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**SCOTT N KAZEM
116-L EDWARDS FERRY ROAD
LEESBURG, VA**

SCC ID NO: **07099831**

5.) STOCK INFORMATION

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

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 116-L Edwards Ferry Road
CITY/ST/ZIP: Leesburg, VA 20176

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:	HUNTER BEVIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	258 INLET DR.		
CITY/ST/ZIP/CO:	PASADENA, MD 21122		
NAME:	STEVEN R CHEEK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2111 WILSON BLVD #600		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201		
NAME:	SCOTT N KAZEM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	116-L EDWARDS FERRY RD NE		
CITY/ST/ZIP/CO:	LEESBURG, VA 20176		
NAME:	BILLY BEILLY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9915 COLONY RD		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22030		
NAME:	Christopher Townsend	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	6120 Wilmington Dr		
CITY/ST/ZIP/CO:	Burke, VA 22015		
NAME:	John Eric Mauthe	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	19416 Coppermine Sq		
CITY/ST/ZIP/CO:	Leesburg, VA 20176		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jacob Burkett TREASURER 11940 Artery Dr Fairfax, VA 22030	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Eshan Ismaili SECRETARY 8563 Yohr Ct Manassas, VA 20110	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ SCOTT N KAZEM	SCOTT N KAZEM, PRESIDENT	5/20/2013
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.