

1.) CORPORATION NAME:

TKE Mu Omega Alumni Association, Inc.

DUE DATE: **6/30/2014**

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-C 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:	SCOTT N KAZEM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	116-C EDWARDS FERRY RD NE		
CITY/ST/ZIP/CO:	LEESBURG, VA 20176		

NAME:	CHRISTOPHER TOWNSEND	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	6120 WILMINGTON DR		
CITY/ST/ZIP/CO:	BURKE, VA 22015		

NAME:	JACOB BURKETT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	11940 ARTERY DR		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22030		

NAME:	ESHAN ISMAILI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	8563 YOHR CT		
CITY/ST/ZIP/CO:	MANASSAS, VA 20110		

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:	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:	Ray Cuevas PRESIDENT 9612 Blake Lane Fairfax, VA 22031	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Shawn Burks DIRECTOR 9797 Maitland Loop Bristow, VA 20136	<input 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, DIRECTOR	5/5/2014
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.