

1.) CORPORATION NAME:

Global Centurion Foundation, Inc.

DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**J ROBERT FLORES
10410 HAMPTON RD
FAIRFAX STATION, VA 22039**

SCC ID NO: **07212558**

5.) STOCK INFORMATION

| | |
|-------|------------|
| CLASS | AUTHORIZED |
|-------|------------|

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5311 TRACTOR LANE

CITY/ST/ZIP: FAIRFAX, VA 22030

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: | LAURA LEDERER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 5311 TRACTOR LANE | | |
| CITY/ST/ZIP/CO: | FAIRFAX, VA 22030 | | |
| NAME: | LISA THOMPSON | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 250 SOUTH REYNOLDS STREET NO 1004 | | |
| CITY/ST/ZIP/CO: | ALEXANDRIA, VA 22304 | | |
| NAME: | PATRICK A TRUEMAN | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 10350 SOUTHAM LANE | | |
| CITY/ST/ZIP/CO: | OAKTON, VA 22124 | | |
| NAME: | John G Malcolm | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 2330 Bancroft Place, N.W. | | |
| CITY/ST/ZIP/CO: | Washington, D.C. , VA 20008 | | |
| NAME: | Singh Bajwa | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 5506 Ridgefield Rd | | |
| CITY/ST/ZIP/CO: | Bethesda, MD 20816 | | |
| NAME: | Elizabeth Dowdell | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | Villanova University | | |
| CITY/ST/ZIP/CO: | 800 E. Lancaster Avenue Villanova, PA 19085 | | |

| | | |
|--|--|-----------|
| NAME: Hans Von Spakovsky TITLE: DIRECTOR ADDRESS: 214 Massachusetts Ave CITY/ST/ZIP/CO: Washington, DC 20002 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Magdalah Silva TITLE: CHAIRMAN ADDRESS: 804 Pershing Drive, Suite 204 CITY/ST/ZIP/CO: Silver Spring, MD 20910 | <input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Daniel Silva TITLE: DIRECTOR ADDRESS: 804 Pershing Drive, Suite 204 CITY/ST/ZIP/CO: Silver Spring, MD 20910 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: John R Flores TITLE: Gen. Counsel ADDRESS: 10410 Hampton Road CITY/ST/ZIP/CO: Fairfax Station, VA 22039 | <input checked="" type="checkbox"/> OFFICER <input 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/ John RFlores | John RFlores, | 4/30/2012 |
| 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. | | |