

1.) CORPORATION NAME:

American Conservative Party, Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**WILLIAM D PORTER
1900 CAMPUS COMMONS DR STE 100
RESTON, VA**

SCC ID NO: **07267073**

5.) STOCK INFORMATION

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

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1900 CAMPUS COMMONS DR
SUITE 100

CITY/ST/ZIP: RESTON, VA 20191

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:	KENNETH MCCLINTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1307 44TH PL, SE		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20019		
NAME:	KENNETH E. KOEDER, JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	780 BATEMAN RD.		
CITY/ST/ZIP/CO:	LOUISVILLE, MS 39339		
NAME:	ALLAN POTESHMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	103 MARIAM PASS		
CITY/ST/ZIP/CO:	MIDDLETOWN, MD 21769		
NAME:	EDWARD SPEARS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	103 S. CLOUDVIEW RD.		
CITY/ST/ZIP/CO:	ROME, GA 30161		
NAME:	DARRIN DICKEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	551 SHARONDALE DR		
CITY/ST/ZIP/CO:	MURFREESBORO, TN 37129		
NAME:	JASON HALE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10 GETTYSBURG DR.		
CITY/ST/ZIP/CO:	NASHUA, NH 03064		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIMOTHY J MILLER DIRECTOR 945 RANCH LANE KALISPELL, MT 59901	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM D PORTER SECRETARY 108 PADDINGTON WAY NE LEESBURG, VA 20176	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEREMY SCHWANBECK DIRECTOR 124 MADISON PL ADAIRSVILLE, GA 30103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAYMOND SPITZER DIRECTOR 11228 NORTH 58TH AVE PHOENIX, AZ 85304	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID TERRY DIRECTOR 5229 SEGARI WAY WINDERMERE, FL 34786	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD WEBB DIRECTOR 302 BARRY DR GREER, SC 29650	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gary Adkins DIRECTOR 6 LONG COURT Fredericksburg, VA 22405	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	George Hathaway DIRECTOR 153 Hickory Road Somerset, NJ 08873	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joyce Swanson DIRECTOR 1170 Blewett Avenue San Jose, CA 95125	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Greg Pruett DIRECTOR 3420 Parktrail Court Caldwell, ID 83605	<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/ WILLIAM D PORTER	WILLIAM D PORTER, SECRETARY	6/18/2013	
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.			