

1.) CORPORATION NAME: Chemen Lavi Foundation	DUE DATE: 6/30/2014
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ANN TOLIVER 811 SUDBURY ST STAUNTON, VA	SCC ID NO: 07385198
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: STAUNTON CITY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2407 Bare Street
Apt N

CITY/ST/ZIP: STAUNTON, VA 24401

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: ANN TOLIVER	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SECRETARY				
ADDRESS: 2407 Bare Street Apt N				
CITY/ST/ZIP/CO: STAUNTON, VA 24401				

NAME: JEANNE BRANCH	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 1710 OLD FORGE ROAD				
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22901				

NAME: PATRICK EUGENE	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 2407 Bare Street Apt N				
CITY/ST/ZIP/CO: Staunton, VA 24401				

NAME: WILLIAM LEE TATE, II	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 8 WOODROW AVE.				
CITY/ST/ZIP/CO: STAUNTON, VA 24401				

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/ ANN TOLIVER	ANN TOLIVER, SECRETARY	5/29/2014
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.