

1.) CORPORATION NAME:

DUE DATE: **3/31/2015**

**PY Vs. PD Foundation**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **07495005**

**PATRICK B YOUNTS  
9594 COVINGTON PL  
MANASSAS, VA**

5.) STOCK INFORMATION

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

**PRINCE WILLIAM COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9594 COVINGTON PL

CITY/ST/ZIP: MANASSAS, VA 20109-3328

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:           | MIKE SEDDON                      | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | VICE CHAIRMAN                    |   |  |
| ADDRESS:        | 11968 BENTON LAKE ROAD           |   |  |
| CITY/ST/ZIP/CO: | BRISTOW, VA 20136                |   |  |
| NAME:           | PATRICK B. YOUNTS                | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | CHAIRMAN                         |   |  |
| ADDRESS:        | 9594 COVINGTON PLACE             |   |  |
| CITY/ST/ZIP/CO: | MANASSAS, VA 20109               |   |  |
| NAME:           | BRIAN GRIFFITH                   | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                         |   |  |
| ADDRESS:        | 5501 MERCHANTS VIEW SQUARE, #271 |   |  |
| CITY/ST/ZIP/CO: | HAYMARKET, VA 20169              |   |  |
| NAME:           | JAMES PARRISH                    | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                         |   |  |
| ADDRESS:        | 10620-C CRESTWOOD DRIVE          |   |  |
| CITY/ST/ZIP/CO: | MANASSAS, VA 20109               |   |  |
| NAME:           | KEN RYDER                        | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                         |   |  |
| ADDRESS:        | 5560 ROAN CHAPEL DR.             |   |  |
| CITY/ST/ZIP/CO: | HAYMARKET, VA 20169              |   |  |
| NAME:           | SHARREE RYDER                    | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR                         |   |  |
| ADDRESS:        | 5560 ROAN CHAPEL DR              |   |  |
| CITY/ST/ZIP/CO: | HAYMARKET, VA 20169              |   |  |

|  |  |                                  |  |
|--|--|----------------------------------|--|
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | MARK SCHMEETS<br>DIRECTOR<br>7935 BLUE GRAY CIRCLE<br>MANASSAS, VA 20109 | <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/ PATRICK B. YOUNTS  | PATRICK B. YOUNTS, CHAIRMAN  | 3/31/2015                        |  |
| 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. |  |                                  |  |