

1.) CORPORATION NAME: <b>Ending Spending Action Fund, Inc.</b>	DUE DATE: <b>5/31/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>INCORPORATING SERVICES LTD 7288 HANOVER GREEN DR MECHANICSVILLE, VA</b>	SCC ID NO: <b>07510134</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 815 SLATERS LANE

CITY/ST/ZIP: ALEXANDRIA, VA 22314

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: BRIAN BAKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: PRES/COO/GC/SEC			
ADDRESS: 815 SLATERS LANE			
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314			

NAME: NANCY H WATKINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
TITLE: TREASURER			
ADDRESS: 610 S BOULEVARD			
CITY/ST/ZIP/CO: TAMPA, FL 33606			

NAME: TODD RICKETTS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: CEO			
ADDRESS: 815 SLATERS LANE			
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314			

NAME: J JOE RICKETTS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
TITLE: CHAIRMAN			
ADDRESS: 815 SLATERS LANE			
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314			

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/ NANCY H WATKINS	NANCY H WATKINS, TREASURER	3/17/2014
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.