

1.) CORPORATION NAME:

disAbility Law Center of Virginia

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**V COLLEEN MILLER
1910 BYRD AVE STE 5
RICHMOND, VA**

SCC ID NO: **07559404**

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1910 Byrd Avenue
Suite 5

CITY/ST/ZIP: Richmond, VA 23230

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.

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|-----------------|--|---|--|
| NAME: | CW Tillman | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 4921 Seminary Road 917 Alexandria, VA 22311 | | |
| CITY/ST/ZIP/CO: | | | |
| NAME: | Maureen Hollowell | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 187 Green Kemp Road Virginia Beach, VA 23462 | | |
| CITY/ST/ZIP/CO: | | | |
| NAME: | Stephen Dawe | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 3006 Fortune Road Henrico, VA 23294 | | |
| CITY/ST/ZIP/CO: | | | |
| NAME: | Bryan Lacy | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 1101 Hampton Street Room #210 Richmond, VA 23220 | | |
| CITY/ST/ZIP/CO: | | | |
| NAME: | Kathryn Merritt | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 5604 Tumblewood Circle Apt. E Henrico, VA 23228 | | |
| CITY/ST/ZIP/CO: | | | |
| NAME: | Karen Michalski-Karney | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 1754 Redwood Road Glade Hill, VA 24092 | | |
| CITY/ST/ZIP/CO: | | | |

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|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Ali Parker DIRECTOR 1136 Wadewood Crescent Woodstock, VA 23664 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Donald Price DIRECTOR 114 Stonebrook Road Winchester, VA 22602 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Angela Thanyachareon DIRECTOR 8224 Laurel Heights Loop Lorton, VA 22079-5650 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Michael Toobin DIRECTOR 9815 Westwood Manor Court Burke, VA 22015 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Eunice Turkson DIRECTOR 8600 Queensmere Place #8 Richmond, VA 23294 | <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/ CW Tillman SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | CW Tillman, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 10/15/2013 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. | | | |