

SCC eFile	2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	216508760
1.) CORPORATION NAME: The MDC Foundation		DUE DATE: 1/31/2016
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DUPRE COCHRAN 614 EAST HIGH ST CHARLOTTESVILLE, VA		SCC ID NO: 07595028
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHARLOTTESVILLE CITY		5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA		
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: C/O SILVERCREST, 230 COURT SQUARE CITY/ST/ZIP: CHARLOTTESVILLE, VA 22902		
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: DUPRE C COCHRAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: SECRETARY		
ADDRESS: 614 EAST HIGH ST		
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22902		
NAME: LEE S COCHRAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: DIRECTOR		
ADDRESS: 614 EAST HIGH ST		
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22902		
NAME: E PEYTON COCHRAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: DIRECTOR		
ADDRESS: 614 EAST HIGH ST		
CITY/ST/ZIP/CO: CHARLOTTESVILLE, VA 22902		
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/ DUPRE C COCHRAN	DUPRE C COCHRAN, SECRETARY	3/8/2016
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.		