

<p>1.) CORPORATION NAME: THE ACACIA ADULT RESIDENTIAL GROUP HOMES OFHAMPTON ROADS, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: LORETTA PROSSER GRAHAM 2 WEST GOVERNOR DRIVE NEWPORT NEWS, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: NEWPORT NEWS CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p>	<p>DUE DATE: 4/30/2014</p> <p>SCC ID NO: 07637275</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMMON</td> <td>1,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2 WEST GOVERNOR DRIVE

CITY/ST/ZIP: NEWPORT NEWS, VA 23602

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.

<p>NAME: LORETTA P GRAHAM</p> <p>TITLE: PRESIDENT</p> <p>ADDRESS: 2 WEST GOVERNOR DRIVE</p> <p>CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23602</p>	<p><input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR</p>
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<p>NAME: Loretta Prosser Graham</p> <p>TITLE: DIRECTOR</p> <p>ADDRESS: 2 West Governor Drive</p> <p>CITY/ST/ZIP/CO: Newport News, VA 23602</p>	<p><input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR</p>
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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/ LORETTA P GRAHAM	LORETTA P GRAHAM, PRESIDENT	6/2/2014
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.