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|---|---|
| 1.) CORPORATION NAME:<br><b>Emmanuel Christian Institute, Inc.</b>  | DUE DATE: <b>5/31/2016</b>  |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CONNIE WELCH<br/>2923 MEDFORD DRIVE<br/>DUMFRIES, VA</b> | SCC ID NO: <b>07919525</b>  |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>PRINCE WILLIAM COUNTY</b>                                     | 5.) STOCK INFORMATION<br>CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b>   |   |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2923 MEDFORD DRIVE

CITY/ST/ZIP: Dumfries, VA 22026

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: JONATHAN BARTON              | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                    |                                  |  |
| ADDRESS: 1214 W GRAHAM RD          |                                  |  |
| CITY/ST/ZIP/CO: RICHMOND, VA 23220 |                                  |  |

|                                      |                                  |  |
|--------------------------------------|----------------------------------|--|
| NAME: JOHN C COBBINAH                | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                      |                                  |  |
| ADDRESS: 1301 JEFFERSON PLAZA        |                                  |  |
| CITY/ST/ZIP/CO: WOODBRIDGE, VA 22191 |                                  |  |

|   |                                  |  |
|---|----------------------------------|--|
| NAME: QUENTIN NEWHOUSE JR                     | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                               |                                  |  |
| ADDRESS: 971 DAVAAR AVE                       |                                  |  |
| CITY/ST/ZIP/CO: MONTREAL, QUEBEC N2V3B7, , FN |                                  |  |

|                                    |                                  |  |
|------------------------------------|----------------------------------|--|
| NAME: CONNIE WELCH                 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                    |                                  |  |
| ADDRESS: 2923 MEDFORD DR           |                                  |  |
| CITY/ST/ZIP/CO: DUMFRIES, VA 22026 |                                  |  |

|                                    |                                  |  |
|------------------------------------|----------------------------------|--|
| NAME: MARY YOUNG                   | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                    |                                  |  |
| ADDRESS: 1500 N LOMBARDY ST        |                                  |  |
| CITY/ST/ZIP/CO: RICHMOND, VA 33220 |                                  |  |

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/ CONNIE WELCH                                    | CONNIE WELCH, DIRECTOR           | 5/18/2016 |
| 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.