

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213551571

1.) CORPORATION NAME:

MOTHERS AGAINST DRUNK DRIVING

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATE CREATIONS NETWORK INC
4445 CORPORATION LN 2ND FL
VIRGINIA BEACH, VA**

SCC ID NO: **F0504292**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 511 E JOHN CARPENTER FREEWAY, STE. 700

CITY/ST/ZIP: IRVING, TX 75062

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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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | JANICE WITHERS | |
| TITLE: | PRESIDENT | |
| ADDRESS: | 511 E JOHN CARPENTER FRWY SUITE 700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | BRIAN URSINO | |
| TITLE: | TREASURER | |
| ADDRESS: | 511 E. JOHN CARPENTER FRWY., #700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | Adam Vanek | |
| TITLE: | GENERAL COUNSEL | |
| ADDRESS: | 511 E. JOHN CARPENTER FRWY., #700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | John T. Griffin | |
| TITLE: | CGO | |
| ADDRESS: | 511 E. JOHN CARPENTER FRWY., #700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | LISTA HIGHTOWER | |
| TITLE: | CFO | |
| ADDRESS: | 511 E JOHN CARPENTER FRWY #700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | VICKI KNOX | |
| TITLE: | ASST SECRETARY | |
| ADDRESS: | 511 E. JOHN CARPENTER FRWY., #700 | |
| CITY/ST/ZIP/CO: | IRVING, TX 75062 | |

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| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Bill Windsor, Jr. PRESIDENT 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | DEBBIE WEIR CEO 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | STEVE BENVENISTI DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | BARBARA BRODT DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | BRAD BULLA DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | SALLY GANEM DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MARY FRANCES KLOTZBACH Vice-CHAIR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | FRANK G. MARGOURILOS DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | Tara Kelley - Baker DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KATHRYN NELSON DIRECTOR 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | COURTNEY POPP SECRETARY 511 E. JOHN CARPENTER FRWY., #700 IRVING, TX 75062 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |

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| NAME: PAUL ROMERO TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: COLLEEN SHEEHEY TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: MAHESH SHETTY TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Robert Carter TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Ronald Medford TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: MONICA VANDEHEI TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: NINA WALKER TITLE: DIRECTOR ADDRESS: 511 E JOHN CARPENTER FRWY SUITE 700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR | |
| NAME: Dana McCown TITLE: DIRECTOR ADDRESS: 511 E. JOHN CARPENTER FRWY., #700 CITY/ST/ZIP/CO: IRVING, TX 75062 | <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/ LISTA HIGHTOWER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | LISTA HIGHTOWER, CFO PRINTED NAME AND CORPORATE TITLE | 10/30/2013 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. | | |