

1.) CORPORATION NAME:

**AWANA CLUBS INTERNATIONAL**

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1391905**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 E BODE RD

CITY/ST/ZIP: STREAMWOOD, IL 60107-6658

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:	JACK EGGAR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME:	DAVID H SWANSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME:	SYLVESTER J CHODY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME:	R DAVID BRANTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME:	JOHN DOBBERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME:	VICKI S GILLIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1 E BODE RD		
CITY/ST/ZIP/CO:	STREAMWOOD, IL 60107		

NAME: THOMAS E KLIPPERT TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DANIEL O PATNODE TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ARTHUR RORHEIM TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHAWN THORNTON TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: HENRY D WALLI TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CHRISTOPHER WILLIAMS TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: VALERIE BELL TITLE: DIRECTOR ADDRESS: 1 E BODE RD CITY/ST/ZIP/CO: STREAMWOOD, IL 60107	<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/ JACK EGGAR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JACK EGGAR, P/CEO PRINTED NAME AND CORPORATE TITLE	8/1/2012 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.		