

1.) CORPORATION NAME:

**Zero-G Weightless Flights Corporation (USED IN VABY:
Zero-Gravity Corporation)**

DUE DATE: **4/30/2012**

SCC ID NO: **F1821612**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 2,500,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4601 N. Fairfax Drive
Suite 1200

CITY/ST/ZIP: Arlington, VA 22203

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: | TERESE BREWSTER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 4601 N. Fairfax Drive Suite 1200 | | |
| CITY/ST/ZIP/CO: | Arlington, VA 22203 | | |

| | | | |
|-----------------|-------------------------------------|---|-----------------------------------|
| NAME: | MICHAEL HENKE | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 4601 N. Fairfax Drive Suite 1200 | | |
| CITY/ST/ZIP/CO: | Arlington, VA 22203 | | |

| | | | |
|-----------------|-------------------------------------|---|--|
| NAME: | ERIC C ANDERSON | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | EXECUTIVE CHAIR | | |
| ADDRESS: | 4601 N. Fairfax Drive Suite 1200 | | |
| CITY/ST/ZIP/CO: | Arlington, VA 22203 | | |

| | | | |
|-----------------|-------------------------------------|---|-----------------------------------|
| NAME: | KARLYN RADER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | CFO | | |
| ADDRESS: | 4601 N. Fairfax Drive Suite 1200 | | |
| CITY/ST/ZIP/CO: | Arlington, VA 22203 | | |

| | | | |
|-----------------|-------------------------------------|----------------------------------|--|
| NAME: | PETER DIAMANDIS | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 4601 N. Fairfax Drive Suite 1200 | | |
| CITY/ST/ZIP/CO: | Arlington, VA 22203 | | |

| | | |
|--|--|--|
| NAME: RICHARD GARRIOTT TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ANDREW LAMPER TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: MICHAEL MCDOWELL TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ALBERTO VASQUEZ TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ROBERT WALKER TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Toby Jackson TITLE: DIRECTOR ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: Byron Lichtenberg TITLE: CTO ADDRESS: 4601 N. Fairfax Drive Suite 1200 CITY/ST/ZIP/CO: Arlington, VA 22203 | <input checked="" type="checkbox"/> OFFICER | <input 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/ TERESE BREWSTER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | TERESE BREWSTER, PRINTED NAME AND CORPORATE TITLE | 4/5/2012 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. | | |