

1.) CORPORATION NAME:

**Americans for Prosperity**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

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

SCC ID NO: **F1823592**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2111 WILSON BLVD STE 350

CITY/ST/ZIP: ARLINGTON, VA 22201-

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.

OFFICER

DIRECTOR

NAME: TIM PHILLIPS  
TITLE: PRESIDENT  
ADDRESS: 2111 WILSON BLVD STE 350  
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: JOHN FLYNN  
TITLE: SECRETARY  
ADDRESS: 2111 WILSON BLVD  
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: STEVE CORDER  
TITLE: TREASURER  
ADDRESS: 2111 WILSON BOULEVARD  
SUITE 350  
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: TRACY HENKE  
TITLE: VICE PRESIDENT  
ADDRESS: 2111 WILSON BOULEVARD  
SUITE 350  
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: PHIL KERPEN  
TITLE: VICE PRESIDENT  
ADDRESS: 2111 WILSON BOULEVARD  
SUITE 350  
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN COBB VICE PRESIDENT 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN PAUL DEGANCE VICE PRESIDENT 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ART POPE CHAIRMAN 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRAYDA LEVY DIRECTOR 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM MILLER DIRECTOR 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES STEPHENSON DIRECTOR 2111 WILSON BOULEVARD SUITE 350 ARLINGTON, VA 22201-	<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/ JOHN FLYNN	JOHN FLYNN, SECRETARY	3/2/2012	
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.			