

1.) CORPORATION NAME:

**JESUIT SEMINARY GUILD, MARYLAND  
PROVINCE, INCORPORATED**

DUE DATE: **5/31/2014**

SCC ID NO: **F1826173**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8600 LASALLE ROAD SUITE 620

CITY/ST/ZIP: TOWSON, MD 21286

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES M. SHEA, S.J.	
TITLE:	PRESIDENT	
ADDRESS:	8600 LASALLE ROAD	
	SUITE 620	
CITY/ST/ZIP/CO:	TOWSON, MD 21286-2014	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES A CASCIOTTI, S.J.	
TITLE:	VICE PRESIDENT	
ADDRESS:	8600 LASALLE ROAD	
	SUITE 620	
CITY/ST/ZIP/CO:	TOWSON, MD 21286-2014	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TIMOTHY J STEPHENS, S.J.	
TITLE:	TREASURER	
ADDRESS:	8600 LASALLE ROAD	
	SUITE 620	
CITY/ST/ZIP/CO:	TOWSON, MD 21286-2014	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TIMOTHY J. STEPHENS, S.J.	
TITLE:	SECRETARY	
ADDRESS:	8600 LASALLE ROAD	
	SUITE 620	
CITY/ST/ZIP/CO:	TOWSON, MD 21286-2014	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN J. CONLEY, S.J.	
TITLE:	DIRECTOR	
ADDRESS:	8600 LASALLE ROAD	
	SUITE 620	
CITY/ST/ZIP/CO:	TOWSON, MD 21286-2014	

NAME: BRUCE A. MAIVELETT, S.J. TITLE: DIRECTOR ADDRESS: 8600 LASALLE ROAD SUITE 620 CITY/ST/ZIP/CO: TOWSON, MD 21286-2014	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: KEVIN F. O'BRIEN, S.J. TITLE: DIRECTOR ADDRESS: 8600 LASALLE ROAD SUITE 620 CITY/ST/ZIP/CO: TOWSON, MD 21286-2014	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ TIMOTHY J STEPHENS, S.J. SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TIMOTHY J STEPHENS, S.J., TREASURER PRINTED NAME AND CORPORATE TITLE	4/15/2014 DATE
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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.