

1.) CORPORATION NAME:

**COOPERATIVE FOR ASSISTANCE AND RELIEF
EVERYWHERE, INC.**

DUE DATE: **9/30/2013**

SCC ID NO: **F1873100**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 151 ELLIS STREET

CITY/ST/ZIP: ATLANTA, GA 30303-2439

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: HELENE D GAYLE TITLE: PRES & CEO ADDRESS: NONE GIVEN CITY/ST/ZIP/CO: *, VA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DEAN C KEHLER TITLE: TREASURER ADDRESS: NONE GIVEN CITY/ST/ZIP/CO: *, VA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Peter Buijs TITLE: CFO ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: W. Bowman Cutter TITLE: CHAIRMAN ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jonathan Mitchell TITLE: COO ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Richard Almeida TITLE: DIRECTOR ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joanne Bradford DIRECTOR 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Eduardo Castro-Wright DIRECTOR 151 Ellis Street Atlanta, VA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gilles Concordel DIRECTOR 151 Ellis Street Atlanta, VA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Susan Crown DIRECTOR 151 Ellis Street Atlanta, VA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Alexander B Cummings DIRECTOR 151 Ellis Street Atlanta, VA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Katharin S. Dyer DIRECTOR 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Carol Hudson Sec to Board 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Paul J Jansen DIRECTOR 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Emery Koenig DIRECTOR 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Richard Marin DIRECTOR 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Doris Meissner VICE CHAIRMAN 151 Ellis Street Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Afaf I Meleis TITLE: DIRECTOR ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: John P Morgridge TITLE: DIRECTOR ADDRESS: 151 Ellis Street CITY/ST/ZIP/CO: Atlanta, GA 30303	<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/ HELENE D GAYLE	HELENE D GAYLE, PRES & CEO	8/13/2013
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.