

1.) CORPORATION NAME:

DUE DATE: **12/31/2013**

**Edgenuity Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1881475**

**UNITED CORPORATE SERVICES, INC.  
7705 YOLANDA ROAD  
RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NV**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7303 E EARLL DR

CITY/ST/ZIP: SCOTTSDALE, AZ 85251

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 type="checkbox"/> DIRECTOR
NAME:	MICHAEL HUMPHREY	
TITLE:	VICE PRESIDENT	
ADDRESS:	7303 E EARLL DR	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85251	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SARI G FACTOR	
TITLE:	CEO	
ADDRESS:	7303 E EARLL DR	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85251	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEVEN J BERGER	
TITLE:	DIRECTOR	
ADDRESS:	140 GREENWICH AVE 3RD FL	
CITY/ST/ZIP/CO:	GREENWICH, CT 06830	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JONATHAN GRAYER	
TITLE:	DIRECTOR	
ADDRESS:	140 GREENWICH AVE 3RD FL	
CITY/ST/ZIP/CO:	GREENWICH, CT 06830	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DAVID S. ALDERSLADE	
TITLE:	TREASURER	
ADDRESS:	7303 E. EARLL DR.	
CITY/ST/ZIP/CO:	#200 SCOTTSDALE, AZ 85251	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DAVID S. ALDERSLADE	
TITLE:	ASST SECRETARY	
ADDRESS:	7303 E. EARLL DR.	
CITY/ST/ZIP/CO:	#200 SCOTTSDALE, AZ 85251	

NAME:	STEVEN J. BERGER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	140 GREENWICH AVENUE		
CITY/ST/ZIP/CO:	3RD FLOOR GREENWICH, CT 06830		

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.

<u>/s/ DAVID S. ALDERSLADE</u>	<u>DAVID S. ALDERSLADE,</u>	<u>12/5/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREASURER 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.