

1.) CORPORATION NAME:

DUE DATE: **3/31/2013**

**Overseas Vote Foundation**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1888520**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA**

5.) STOCK INFORMATION

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

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4325 OLD GLEBE RD

CITY/ST/ZIP: ARLINGTON, VA 22207

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:	SUSAN DZIEDUSZYCKA-SUINAT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	PARKSTR 44A		
CITY/ST/ZIP/CO:	BAIERBRUNN, 82065, DE		
NAME:	CHIP LEVENGOOD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	PO BOX 607		
CITY/ST/ZIP/CO:	CHESTERTOWN, MD 21620-0607		
NAME:	Richard Vogt	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Treasurer/CFO		
ADDRESS:	104 Firethorne Court		
CITY/ST/ZIP/CO:	Greer, SC 29650		
NAME:	Paul McGuire	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	Obernzellerstr. 14		
CITY/ST/ZIP/CO:	Munich, 81549, DE		
NAME:	Jim Brenner	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	60 State St Libby 7		
CITY/ST/ZIP/CO:	Boston, MA 02109		
NAME:	Pat Hollarn	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	139 Poquito Rd		
CITY/ST/ZIP/CO:	Shalimar, FL 32579		

NAME: Kate Hurlock TITLE: DIRECTOR ADDRESS: 55 Kelley Green CITY/ST/ZIP/CO: New Canaan, CT 06840	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Denise Sangster TITLE: DIRECTOR ADDRESS: 1140 Arlington Blvd CITY/ST/ZIP/CO: El Cerrito, CA 94530	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: J.R. McDonald TITLE: DIRECTOR ADDRESS: 1 Grandview Dr CITY/ST/ZIP/CO: Shalimar, FL 32579	<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/ Richard Vogt SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Richard Vogt, Treasurer/CFO PRINTED NAME AND CORPORATE TITLE	5/1/2013 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.		