

SCC eFile	2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	216506119						
1.) CORPORATION NAME: PULMONARY ASSOCIATES, LTD.		DUE DATE: 4/30/2016						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JULIETTE L WOHLRAB 5216 DAWES AVE. ALEXANDRIA, VA		SCC ID NO: 01518463						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALEXANDRIA CITY		5.) STOCK INFORMATION						
4.) STATE OR COUNTRY OF INCORPORATION: VA		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMMON</td> <td>10,000</td> </tr> <tr> <td>PREFER</td> <td>500</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMMON	10,000	PREFER	500
CLASS	AUTHORIZED							
COMMON	10,000							
PREFER	500							
6.) PRINCIPAL OFFICE ADDRESS:								
ADDRESS: 5216 DAWES AVE CITY/ST/ZIP: ALEXANDRIA, VA 22311								
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: ROBERT HERSCOWITZ MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: PRES/TREAS								
ADDRESS: 7901 WOODROW PL								
CITY/ST/ZIP/CO: CABIN JOHN, MD 20818								
NAME: JULIETTE WOHLRAB, MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: VP/SEC								
ADDRESS: 650 N ARMISTEAD ST								
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22312								
NAME: TERRI STRASSBURGER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
TITLE: ASST TREAS								
ADDRESS: 7901 WOODROW PLACE								
CITY/ST/ZIP/CO: CABIN JOHN, MD 20818								
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/ ROBERT HERSCOWITZ MD	ROBERT HERSCOWITZ MD,	2/19/2016						
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.								