

1.) CORPORATION NAME: <b>Mary Washington Hospital Foundation, Inc.</b>	DUE DATE: <b>10/31/2012</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>MW HEALTHCARE REGISTERED AGENT LLC 2300 FALL HILL AVE STE 509 FREDERICKSBURG, VA 22401-3343</b>	SCC ID NO: <b>02480879</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FREDERICKSBURG CITY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2600 MARY WASHINGTON BLVD.  
CITY/ST/ZIP: FREDERICKSBURG, VA 22401

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: XAVIER R. RICHARDSON		
TITLE: PRESIDENT		
ADDRESS: 2600 MARY WASHINGTON BOULEVARD		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22401		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM B YOUNG		
TITLE: S/T		
ADDRESS: PO BOX 8029/317 WILLIAM ST		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22404		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SEAN T BARDEN		
TITLE: CFO		
ADDRESS: 2300 FALL HILL AVENUE STE 308		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22401		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARY KATHERINE GREENLAW		
TITLE: CHAIR		
ADDRESS: 405 FAUQUIER STREET		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22401		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Edward Allison		
TITLE: VICE CHAIR		
ADDRESS: 2600 Mary Washington Blvd		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22401		

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/ XAVIER R. RICHARDSON	XAVIER R. RICHARDSON,	9/28/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.