

1.) CORPORATION NAME: **POTOMAC AREA TECHNOLOGY AND COMPUTER SOCIETY, INCORPORATED** DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **PAUL L HOWARD** SCC ID NO: **02722890**

12811 TURBERVILLE LANE 5.) STOCK INFORMATION
OAK HILL, VA CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION: **VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: C/O J W RHODES
201 S KENSINGTON ST

CITY/ST/ZIP: ARLINGTON, VA 22204-1141

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: JAMES W RHODES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: PRESIDENT		
ADDRESS: 201 S KENSINGTON ST		
CITY/ST/ZIP/CO: ARLINGTON, VA 22204		

NAME: MELVIN C. MIKOSKINSKI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: 2ND VP		
ADDRESS: 4628 VALERIE CT.		
CITY/ST/ZIP/CO: ANNANDALE, VA 22003-3940		

NAME: RONALD G. SCHMIDT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: 1ST VP		
ADDRESS: 7110 RIVERDALE ROAD		
CITY/ST/ZIP/CO: LANHAM, MD 20706		

NAME: PAUL L HOWARD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: TREASURER		
ADDRESS: 12811 TURBERVILLE LANE		
CITY/ST/ZIP/CO: HERNDON, VA 20171-2219		

NAME: WILLIAM C WALSH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: SECRETARY		
ADDRESS: 6916 WESTLAWN DRIVE		
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042-2653		

NAME: LANCE J. DAKIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: DIRECTOR		
ADDRESS: 3538 DEVON DR.		
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042-4028		

NAME: SEYMORE L. FISHBEIN TITLE: DIRECTOR ADDRESS: 5614 N. 16TH ST. CITY/ST/ZIP/CO: ARLINGTON, VA 22205-2808	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WALTER J. FRASER TITLE: DIRECTOR ADDRESS: PO BOX 1862 CITY/ST/ZIP/CO: WASHINGTON, DC 20012-1862	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROGER M. FUJII TITLE: DIRECTOR ADDRESS: 7847 BROMPTON ST. CITY/ST/ZIP/CO: SPRINGFIELD, VA 22152-1953	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GABRIEL GOLDBERG TITLE: DIRECTOR ADDRESS: 3401 SILVER MAPLE PL. CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MELVIN H. GOLDFARB TITLE: DIRECTOR ADDRESS: 5045 KENERSON DR. CITY/ST/ZIP/CO: FAIRFAX, VA 22032-2119	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GEOFFREY P. GOODRUM TITLE: DIRECTOR ADDRESS: 30 FENDALL AVENUE CITY/ST/ZIP/CO: ALEXANDRIA, VA 22304-6300	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT ROTT TITLE: DIRECTOR ADDRESS: 12105 GREENWAY CT. SUITE 301 CITY/ST/ZIP/CO: FAIRFAX, VA 22033-2565	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: NICHOLAS WENRI TITLE: DIRECTOR ADDRESS: 10101 SPRING HOLLOW LN CITY/ST/ZIP/CO: GREAT FALLS, VA 22066-2827	<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/ PAUL L HOWARD SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PAUL L HOWARD, TREASURER PRINTED NAME AND CORPORATE TITLE	6/17/2013 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.		