

1.) CORPORATION NAME:

**AMERICANS HELPING AMERICANS, INC.**

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PAUL KRIZEK  
2550 HUNTINGTON AVE STE 200  
ALEXANDRIA, VA 22303**

SCC ID NO: **03619608**

5.) STOCK INFORMATION

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

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2550 HUNTINGTON AVENUE, SUITE #200

CITY/ST/ZIP: ALEXANDRIA, VA 22303-1499

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:	EUGENE L. KRIZEK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303-1499		
NAME:	JAMES J O'BRIEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303		
NAME:	QUELYNN THOMAS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC DIRECTOR		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303		
NAME:	NISHA SINGH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303		
NAME:	PAUL KRIZEK, ESQ.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303		
NAME:	CLYDE B. RICHARDSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2550 HUNTINGTON AVENUE, SUITE 200		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22303		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EMIL HER MANY HORSES DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	REV. CHARLES T. HOLLIDAY DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS M. O'BRIEN DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHERRILL "KATSI COOK" BARREIRO DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK STITELY, CPA DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TRACY KELSO, MSW DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT J. HISEL, JR. DIRECTOR 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRYAN KRIZEK CEO 2550 HUNTINGTON AVENUE, SUITE 200 ALEXANDRIA, VA 22303	<input checked="" type="checkbox"/> OFFICER	<input 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 KRIZEK, ESQ. SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PAUL KRIZEK, ESQ., VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/24/2013 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.			