

1.) CORPORATION NAME:

National Student Clearinghouse

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **7/31/2011**

SCC ID NO: **04118691**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2300 DULLES STATION BLVD
STE 300

CITY/ST/ZIP: HERNDON, VA 20171-

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: RICARDO D TORRES
TITLE: PRESIDENT
ADDRESS: 2300 DULLES STATION BLVD
STE 300
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: GEORGE LEVATHES
TITLE: VP/T
ADDRESS: 2300 DULLES STATION BLVD
STE 300
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: TRACIE MACMAHON
TITLE: VICE PRESIDENT
ADDRESS: 2300 DULLES STATION BLVD
STE 300
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: MS ROBERTA HYLAND
TITLE: AVP/CORP SEC
ADDRESS: 2300 DULLES STATION BLVD
STE 300
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANINE GREENWOOD VICE PRESIDENT 2300 DULLES STATION BLVD STE 300 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUG FALK VICE PRESIDENT 2300 DULLES STATION BLVD STE 300 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAMERON HOWELL AVP 2300 DULLES STATION BLVD STE 300 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID LONGANECKER CHAIRMAN 3035 CENTER GREEN DRIVE #200 BOULDER, CO 80301-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DORIS GROSE VICE CHAIRMAN 8960 CLIFFSIDE LANE FAIR OAKS, CA 95628-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALISA ABADINSKY DIRECTOR 809 S. MARSHFIELD AVENUE ROOM 229 MC557 CHICAGO, IL 60612-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROLYN AINSLIE DIRECTOR 701 CARNEGIE CENTER SUITE 431 PRINCETON, NJ 08540-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WALTER BUMPHUS DIRECTOR 1 DUPONT CIRCLE, NW SUITE 310 WASHINGTON, DC 20036-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN CASTEEN DIRECTOR 766 CLUB DRIVE KESWICK, VA 22947-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIMOTHY CONNELL DIRECTOR 2082 EAST EXCHANGE PLACE TUCKER, GA 30084-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL DOMENECH DIRECTOR 801 N QUINCY STREET ARLINGTON, VA 22203-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES RONALD GAMBILL DIRECTOR 501 CORPORATE CENTRE DRIVE SUITE 320 FRANKLIN, TN 37067-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STANLEY HENDERSON DIRECTOR 4901 EVERGREEN ROAD 1060 AB DEARBORN, MI 48128-1491	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM HURRY DIRECTOR 560 JEFFERSON BLVD WARWICK, RI 02886-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL LINGENFELTER DIRECTOR 3035 CENTER GREEN DRIVE #100 BOULDER, CO 80301-2251	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUE MCMILLIN DIRECTOR 301 SUNDANCE PARKWAY ROUND ROCK, TX 78681-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBORAH SANTIAGO DIRECTOR 1717 N STREET, NW 2ND FLOOR WASHINGTON, DC 20036-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK VOEGELE DIRECTOR 8740 LUCENT BLVD SUITE 400 HIGHLANDS RANCH, CO 80129-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

OFFICER DIRECTOR

NAME: DONALD HOSSLER
TITLE: Rsrch Ctr E Dir
ADDRESS: 2300 DULLES STATION BLVD
 SUITE 300
CITY/ST/ZIP/CO: HERNDON, VA 20171-

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.

<u>/s/ MS ROBERTA HYLAND</u>	<u>MS ROBERTA HYLAND,</u>	<u>6/22/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>AVP/CORP SEC</u> 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.