

1.) CORPORATION NAME:

FAIRFAX PETS ON WHEELS, INC.

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JUDITH A MITNICK
400 S MAPLE AVE #210
FALLS CHURCH, VA 22046**

SCC ID NO: **04501367**

5.) STOCK INFORMATION

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

FALLS CHURCH CITY (FILED IN ARLINGTON COUNTY)

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12011 GOVERNMENT CENTER PKWY
SUITE 708

CITY/ST/ZIP: FAIRFAX, VA 22035-1104

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:	TRACY VAN DUSTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	4104 Oxford Lane Number 301		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22030		
NAME:	BONNIE BURHAM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	13133 CURVED IRON ROAD		
CITY/ST/ZIP/CO:	HERNDON, VA 20171		
NAME:	KIM WILKERSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	3206 ROLLIN ROAD		
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22042		
NAME:	DEBBIE ZELTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2602 OGDEN ST		
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22043		
NAME:	Patty Kwapniewski	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12705 Turberville Court		
CITY/ST/ZIP/CO:	Herndon, VA 20171		
NAME:	Ruth Benker	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9923 Tartan Court		
CITY/ST/ZIP/CO:	Vienna, VA 22181		

NAME: Kathi Baker TITLE: DIRECTOR ADDRESS: 925 Welham Green Road CITY/ST/ZIP/CO: Great Falls, VA 22066	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Liz Breyer TITLE: DIRECTOR ADDRESS: 1105 Old Cedar Road CITY/ST/ZIP/CO: McLean, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Laurie Stone TITLE: DIRECTOR ADDRESS: 5523 Shooters Hill Lane CITY/ST/ZIP/CO: FAIRFAX, VA 22032	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Madelynn Arnold TITLE: DIRECTOR ADDRESS: 4828 Martin Street CITY/ST/ZIP/CO: Alexandria, VA 22312	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Nikki DiPalma TITLE: DIRECTOR ADDRESS: 807 Gibbon Street CITY/ST/ZIP/CO: Alexandria, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Carla Graham TITLE: DIRECTOR ADDRESS: 8101 Carrick Lane CITY/ST/ZIP/CO: Springfield, VA 22151	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Patricia Leader TITLE: DIRECTOR ADDRESS: 214 Falcon Ridge Road CITY/ST/ZIP/CO: Great Falls, VA 22066	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Judith Mitnick TITLE: DIRECTOR ADDRESS: 7602 Marion Court CITY/ST/ZIP/CO: Falls Church , VA 22042	<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/ TRACY VAN DUSTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TRACY VAN DUSTON, PRESIDENT PRINTED NAME AND CORPORATE TITLE	7/31/2012 DATE
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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.