

1.) CORPORATION NAME:

GAGHAN MECHANICAL, INC.

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**KEVIN P. GAGHAN
4106 GIBBS STREET
ALEXANDRIA, VA**

SCC ID NO: **04605317**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	25,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5649 D GENERAL WASHINGTON DR

CITY/ST/ZIP: ALEXANDRIA, VA 22312

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:	KEVIN PAUL GAGHAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	7316 Churchill Road		
CITY/ST/ZIP/CO:	McLean, VA 22101		
NAME:	LINDA KISER GAGHAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	7316 Churchill Road		
CITY/ST/ZIP/CO:	McLean, VA 22101		
NAME:	ROBERT CASASSA PA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8062 NORTH 56TH ST		
CITY/ST/ZIP/CO:	TAMPA, FL 33617		
NAME:	JOSEPH HUGHES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4928 SENTINEL DRIVE UNIT 305		
CITY/ST/ZIP/CO:	BETHESDA, MD 20816		
NAME:	MARTIN JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8073 WINSTEAD MANOR LANE		
CITY/ST/ZIP/CO:	LORTON, VA 22079		
NAME:	HARRY WARD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	525 LAKESIDE CIRCLE		
CITY/ST/ZIP/CO:	POMPANO BEACH, FL 33060		

NAME: CORY LECKEY TITLE: DIRECTOR ADDRESS: 8709 Millbrook Place CITY/ST/ZIP/CO: Alexandria, VA 22309	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: SHARON ALDREDGE TITLE: DIRECTOR ADDRESS: 10600 Ignatius Digges Drive CITY/ST/ZIP/CO: Upper Marlboro, MD 20772	<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/ KEVIN PAUL GAGHAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KEVIN PAUL GAGHAN, PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/6/2014 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.		