

1.) CORPORATION NAME:

TJHSST Band Boosters, Inc.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LAURA NAIDE
5720 GLADDEN CT.
ALEXANDRIA, VA 22303**

SCC ID NO: **04722443**

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: C/O THOMAS JEFFERSON HIGH SCH
6560 BRADDOCK ROAD

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:	Christina Higgins	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	11407 Meath Dr		
CITY/ST/ZIP/CO:	Fairfax, VA 22030		
NAME:	Laura Naide	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	6560 BRADDOCK ROAD		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22312		
NAME:	Jenny Molloy	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	6560 BRADDOCK ROAD		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22312		
NAME:	Julia Griffith	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	6560 BRADDOCK RD		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22312		
NAME:	Dana Stalcup	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	6560 Braddock Road		
CITY/ST/ZIP/CO:	Alexandria , VA 22312		
NAME:	Cindy Stalcup	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	6560 Braddock Road		
CITY/ST/ZIP/CO:	Alexandria, VA 22312		

NAME: Kevin Richardson TITLE: VICE PRESIDENT ADDRESS: 6560 Braddock Road CITY/ST/ZIP/CO: Alexandria, VA 22312	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Margaret Daube TITLE: VICE PRESIDENT ADDRESS: 6560 Braddock Road CITY/ST/ZIP/CO: Alexandria, VA 22312	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Mamta Agarwal TITLE: VICE PRESIDENT ADDRESS: 6560 Braddock CITY/ST/ZIP/CO: Alexandria, VA 22312	<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/ Laura Naide SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Laura Naide, TREASURER PRINTED NAME AND CORPORATE TITLE	10/29/2012 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.		