

1.) CORPORATION NAME:

**VIRGINIA HEALTH AGENCIES, INC.**

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARK E SLAUGHTER  
222 CENTRAL PARK AVENUE, SUITE 1500  
VIRGINIA BEACH, VA 23462**

SCC ID NO: **04936241**

5.) STOCK INFORMATION

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

**VIRGINIA BEACH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 813 DILIGENCE DRIVE #121A

CITY/ST/ZIP: NEWPORT NEWS, VA 23606

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:	R ROGER WOLFE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	813 DILIGENCE DR STE 121-A		
CITY/ST/ZIP/CO:	NEWPORT NEWS, VA 23606		
NAME:	SHARON GROSSMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3759 Surry Rd.		
CITY/ST/ZIP/CO:	VA BEACH, VA 23455		
NAME:	DEANNIE ELDRIDGE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIR		
ADDRESS:	870 GREENBRIAR CIR #104		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320		
NAME:	TIM GRESHAM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIR		
ADDRESS:	11618 BUSY ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23236		
NAME:	LINDA VINES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1500 FORREST AVENUE #124		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	Annie Magnant	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7112 Church Lane		
CITY/ST/ZIP/CO:	Toano, VA 23168		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Melina Davis-Martin DIRECTOR 9239 Stephens Manor Dr. Mechanicsville, VA 23116	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gino Colombara TREASURER 6350 Center Dr., Suite 102 Norfolk, VA 23502	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jeremy Beauchamp DIRECTOR 4217 Park Place Court Glen Allen, VA 23060	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Michelle Couch DIRECTOR 4416 Expressway Dr. Virginia Beach, VA 23452	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sheri Lambert DIRECTOR 5540 Falmouth St., Suite 101 Richmond, VA 23230	<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/ R ROGER WOLFE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	R ROGER WOLFE, PRESIDENT PRINTED NAME AND CORPORATE TITLE	9/27/2012 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.			