

1.) CORPORATION NAME:

Dominion Technical Solutions, Inc.

DUE DATE: **4/30/2011**

SCC ID NO: **05759410**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 701 EAST CARY STREET

CITY/ST/ZIP: RICHMOND, VA 23219-

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: PAUL D KOONCE
TITLE: PRESIDENT
ADDRESS: 120 TREDEGAR ST
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: JAMES P CARNEY
TITLE: VP/ASST T
ADDRESS: 100 TREDEGAR STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: E J MARKS III
TITLE: ASST SECRETARY
ADDRESS: 100 TREDEGAR ST
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: CARTER M REID
TITLE: VP/GENCOUNSEL/S
ADDRESS: 100 TREDEGAR ST
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: G SCOTT HETZER
TITLE: SVP/TAXANDTREAS
ADDRESS: 100 TREDEGAR ST
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RODNEY BLEVINS VICE PRESIDENT 120 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH D BARKER VICE PRESIDENT 120 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOT C HATHAWAY VICE PRESIDENT 120 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH G O'HARE VICE PRESIDENT 120 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WESLEY GREGORY CONTROLLER 120 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN L NEWMAN ASST TREASURER 100 TREDEGAR STREET RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ E J MARKS III	E J MARKS III, ASST SECRETARY	4/7/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.