

1.) CORPORATION NAME:

Dominion Technical Solutions, Inc.

DUE DATE: **4/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **05759410**

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PAUL D KOONCE	
TITLE:	PRESIDENT	
ADDRESS:	120 TREDEGAR ST	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KENNETH D BARKER	
TITLE:	VICE PRESIDENT	
ADDRESS:	120 TREDEGAR STREET	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	P. RODNEY BLEVINS	
TITLE:	VICE PRESIDENT	
ADDRESS:	120 TREDEGAR STREET	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JAMES P CARNEY	
TITLE:	VP/ASST T	
ADDRESS:	100 TREDEGAR STREET	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SCOT C HATHAWAY	
TITLE:	VICE PRESIDENT	
ADDRESS:	120 TREDEGAR STREET	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOSEPH G O'HARE	
TITLE:	VICE PRESIDENT	
ADDRESS:	120 TREDEGAR STREET	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARTER M REID VP/GENCOUNSEL/S 100 TREDEGAR ST RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHARON L BURR ASST SECRETARY 100 TREDEGAR ST RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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
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
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	G SCOTT HETZER SVP/TAXANDTREAS 100 TREDEGAR ST RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BECKY C MERRITT VICE PRESIDENT 100 TREDEGAR STREET RICHMOND, VA 23219	<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/ SHARON L BURR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SHARON L BURR, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	4/24/2012 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.			