

1.) CORPORATION NAME:

Virginia Association of Personal Care Providers, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

ATTORNEY

WILLIAM J SEIDEL

**1111 EAST MAIN STREET, 16TH FLOOR
RICHMOND, VA 23219**

DUE DATE: **10/31/2011**

SCC ID NO: **05862693**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 413 STUART CIRCLE SUITE 120

CITY/ST/ZIP: RICHMOND, VA 23220-

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: JACK NELMS
TITLE: TREASURER
ADDRESS: 1500 HUGUENOT ROAD
STE 104
CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113-

OFFICER

DIRECTOR

NAME: BONNIE GORDON
TITLE: POLICY CHAIR
ADDRESS: 413 STUART CIRCLE
STE 120
CITY/ST/ZIP/CO: RICHMOND, VA 23220-

OFFICER

DIRECTOR

NAME: OLIVIA CRAWLEY JONES
TITLE: PRESIDENT
ADDRESS: 10041 MIDLOTHIAN TURNPIKE
CITY/ST/ZIP/CO: RICHMOND, VA 23235-

OFFICER

DIRECTOR

NAME: DEBORAH OGREN
TITLE: SECRETARY
ADDRESS: 11847 CANON BLVD, STE 12
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23606-

OFFICER

DIRECTOR

NAME: STEVE MIZE
TITLE: AT LARGE MEMBER
ADDRESS: 3352 HALIFAX RD
CITY/ST/ZIP/CO: SOUTH BOSTON, VA 24592-

OFFICER

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.

<u>/s/ OLIVIA CRAWLEY JONES</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>OLIVIA CRAWLEY JONES, PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>1/17/2012</u> 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.