

1.) CORPORATION NAME:

Loudoun Cares

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
WILLIAM A JOHNSTON
210 WIRT STREET SW
STE B-2**

LEESBURG, VA 20175

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LOUDOUN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **11/30/2011**

SCC ID NO: **05869151**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 210 WIRT STREET SW
STE B-2

CITY/ST/ZIP: LEESBURG, VA 20175-

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: PETER C BURNETT
TITLE: PRESIDENT
ADDRESS: 105 LOUDOUN ST SE
CITY/ST/ZIP/CO: LEESBURG, VA 20175-

OFFICER

DIRECTOR

NAME: WILLIAM A JOHNSTON
TITLE: DIRECTOR
ADDRESS: 405 BELMONT DR, SW
CITY/ST/ZIP/CO: LEESBURG, VA 20175-

OFFICER

DIRECTOR

NAME: CAROL BARBE
TITLE: TREASURER
ADDRESS: 19951 SMITH CIRCLE
CITY/ST/ZIP/CO: LEESBURG, VA 20176-

OFFICER

DIRECTOR

NAME: SHAYA FITZGERALD
TITLE: DIRECTOR
ADDRESS: 42885 NASHUA ST
CITY/ST/ZIP/CO: ASHBURN, VA 20147-

OFFICER

DIRECTOR

NAME: JUDY HINES
TITLE: SECRETARY
ADDRESS: 213 ANDOVER CT., NE
CITY/ST/ZIP/CO: LEESBURG, VA 20176-

OFFICER

DIRECTOR

NAME: SUSAN K SNYDER OFFICER DIRECTOR
TITLE: VICE PRESIDENT
ADDRESS: 17512 PINEHURST CT
CITY/ST/ZIP/CO: PURCELLVILLE, VA 20132-

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/ WILLIAM A JOHNSTON WILLIAM A JOHNSTON, 9/20/2011
SIGNATURE OF DIRECTOR/OFFICER DIRECTOR DATE
LISTED IN THIS REPORT PRINTED NAME AND CORPORATE
TITLE

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.