

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212514896

1.) CORPORATION NAME:

Trinity IV Manager, Inc.

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **05980230**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7500 OLD GEORGETOWN RD 15TH FL

CITY/ST/ZIP: BETHESDA, MD 20814

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:	LAWRENCE C. NUSSDORF		
TITLE:	PRESIDENT		
ADDRESS:	7500 OLD GEORGETOWN ROAD, 15TH FLOOR		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT J. FLANAGAN		
TITLE:	EX VP		
ADDRESS:	7500 OLD GEORGETOWN ROAD, 15TH FLOOR		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JAMES R MARTIN		
TITLE:	VICE PRESIDENT		
ADDRESS:	5870 TRINITY PKWY		
CITY/ST/ZIP/CO:	STE 600 CENTREVILLE, VA 20120		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	REBECCA L. OWEN		
TITLE:	SR VP/ASST S		
ADDRESS:	7500 OLD GEORGETOWN ROAD, 15TH FLOOR		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TERRI D KLATZKIN		
TITLE:	TREASURER		
ADDRESS:	7500 OLD GEORGETOWN ROAD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CONNIE PUMPHREY		
TITLE:	SECRETARY		
ADDRESS:	7500 OLD GEORGETOWN ROAD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	A. J. CLARK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7500 OLD GEORGETOWN ROAD, 15TH FLOOR		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	MICHELLE A. DREYER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2711 CENTERVILLE ROAD, SUITE 400		
CITY/ST/ZIP/CO:	CORPORATION SERVICES COMPANY WILMINGTON, DE 19808		

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/ LAWRENCE C. NUSSDORF</u>	<u>LAWRENCE C. NUSSDORF,</u>	<u>4/24/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT 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.