

1.) CORPORATION NAME:

AmericaView

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

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

DUE DATE: **6/30/2011**

SCC ID NO: **05981055**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 324A LEON JOHNSON HALL
PO BOX 173120

CITY/ST/ZIP: BOZEMAN, MT 59717-3120

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: MILDA VAITKUS
TITLE: SECRETARY
ADDRESS: UNIVERSITY OF NEBRASKA-LINCOLN
3310 HOLDREGE ST, 319 HARDIN HALL
CITY/ST/ZIP/CO: LINCOLN, NE 68583-0973

OFFICER

DIRECTOR

NAME: DR RICK LAWRENCE
TITLE: DIRECTOR
ADDRESS: MONTANA STATE UNIV
P O BOX 173490
CITY/ST/ZIP/CO: BOZEMAN, MT 59717-

OFFICER

DIRECTOR

NAME: CHRISTINE MCMICHAEL
TITLE: TREASURER
ADDRESS: MOREHEAD STATE UNIVERSITY
CITY/ST/ZIP/CO: MOREHEAD, KY 40351-

OFFICER

DIRECTOR

NAME: BRENT YANTIS
TITLE: VICE CHAIRMAN
ADDRESS: UNIVERSITY OF LOUISIANA AT LAFAYETTE
635 CAJUNDOME BLVD.
CITY/ST/ZIP/CO: LAFAYETTE, LA 70505-

OFFICER

DIRECTOR

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	RAMESH SIVANPILLAI	
TITLE:	CHAIRMAN	
ADDRESS:	1000 EAST UNIVERSITY AVENUE UNIVERSITY OF WYOMING	
CITY/ST/ZIP/CO:	LARAMIE, WV 82071-4008	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES CAMPBELL	
TITLE:	DIRECTOR	
ADDRESS:	VIRGINIA TECH	
CITY/ST/ZIP/CO:	BLACKSBURG, VA 24051-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JARLATH O'NEIL-DUNNE	
TITLE:	DIRECTOR	
ADDRESS:	UNIVERSITY OF VERMONT	
CITY/ST/ZIP/CO:	BURLINGTON, VT 05405-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RICK LANDENBERGER	
TITLE:	Chief Executive	
ADDRESS:	WEST VIRGINIA UNIVERITY PO BOX 6300	
CITY/ST/ZIP/CO:	MORGANTOWN, WV 26506-6300	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DEBBIE DEAGEN	
TITLE:	Chief Financial	
ADDRESS:	MONTANA STATE UNIVERSITY PO BOX 173120	
CITY/ST/ZIP/CO:	BOZEMAN, MT 59717-3120	

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/ DEBBIE DEAGEN</u>	<u>DEBBIE DEAGEN, Chief Financial</u>	<u>5/26/2011</u>
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.