

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	212534302
1.) CORPORATION NAME: <b>Companion Care Association, Inc.</b>		DUE DATE: <b>10/31/2012</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>BARRY A COOPER 5031 NORTH 25TH ST ARLINGTON, VA 22207</b>		SCC ID NO: <b>06041248</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>ARLINGTON COUNTY</b>		5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>		
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 5031 NORTH 25TH ST  CITY/ST/ZIP: ARLINGTON, VA 22207		
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: BARRY A COOPER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: PRES/COB		
ADDRESS: 5031 N 25TH ST		
CITY/ST/ZIP/CO: ARLINGTON, VA 22207		
NAME: GARY L FILERMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: SEC/TREAS		
ADDRESS: 1322 BANQUO COURT		
CITY/ST/ZIP/CO: MCLEAN, VA 22102		
NAME: ROBERT TERZIAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE: DIRECTOR		
ADDRESS: 4231 SLEEPY HOLLOW DR		
CITY/ST/ZIP/CO: ANNANDALE, VA 22003		
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/ BARRY A COOPER	BARRY A COOPER, PRES/COB	9/5/2012
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.		