

1.) CORPORATION NAME:

East End Pharmacy, Inc.

DUE DATE: **8/31/2011**

SCC ID NO: **06218283**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
THOMAS GOODE
2501 MARSHALL AVE
NEWPORT NEWS, VA 23607**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

NEWPORT NEWS CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2501 MARSHALL AVENUE

CITY/ST/ZIP: NEWPORT NEWS, VA 23607-

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: THOMAS GOODE
TITLE: VP/T
ADDRESS: 112 HILDA CIRCLE
CITY/ST/ZIP/CO: HAMPTON, VA 23666-

OFFICER

DIRECTOR

NAME: CARMEN M DOWNING
TITLE: AT/AS
ADDRESS: 15 RED LEAF PLACE
CITY/ST/ZIP/CO: HAMPTON, VA 23666-

OFFICER

DIRECTOR

NAME: GLORIA F CARTER
TITLE: DIRECTOR
ADDRESS: 930 SHORE DRIVE
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23607-

OFFICER

DIRECTOR

NAME: PAMELA SHAVERS-KING
TITLE: DIRECTOR
ADDRESS: 232 PRINCE DREW ROAD
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23606-

OFFICER

DIRECTOR

NAME: CONWAY A DOWNING JR
TITLE: P/S
ADDRESS: 3883 CONNECTICUT AVE., NW
UNIT 101
CITY/ST/ZIP/CO: WASHINGTON, DC 20008-

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/ CARMEN M DOWNING</u>	<u>CARMEN M DOWNING, AT/AS</u>	<u>12/23/2011</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.