

1.) CORPORATION NAME:

AVECTRA Users Group

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOHN B CONNER
4301 WILSON BLVD
ARLINGTON, VA 22203**

SCC ID NO: **06221139**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4301 WILSON BLVD

CITY/ST/ZIP: ARLINGTON, VA 22203

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 type="checkbox"/> DIRECTOR
NAME:	MATTHEW FORREST	
TITLE:	PRESIDENT	
ADDRESS:	4301 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22203	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Stephen Crocker	
TITLE:	Vice Pres - KS	
ADDRESS:	1421 Research Park Dr	
CITY/ST/ZIP/CO:	Lawrence, KS 66049	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MADELYN ROCHE	
TITLE:	TREASURER	
ADDRESS:	4301 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22203	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN B CONNER	
TITLE:	CEO	
ADDRESS:	4301 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22203	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	NANCY LESLIE	
TITLE:	SECRETARY	
ADDRESS:	2900 HIGHWOODS BLVD	
CITY/ST/ZIP/CO:	RALEIGH, NC 27604	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Lisa Stefanoff	
TITLE:	Vice Pres - NY	
ADDRESS:	136 Madison Av, 12th floor	
CITY/ST/ZIP/CO:	New York, NY 10016	

NAME: Zeljko Kampel TITLE: Vice Pres - IL ADDRESS: 141 Northwest point Blvd CITY/ST/ZIP/CO: Elk Grove Village, IL 60007	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: Charles Szmazsek TITLE: Vice Pres - CT ADDRESS: 1570 Boston Post Rd CITY/ST/ZIP/CO: Guilford, CT 06437	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ JOHN B CONNER	JOHN B CONNER, CEO	6/12/2012
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.