

1.) CORPORATION NAME:

The National Capital Bearded Collie Club

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIANA CLAYTON
10022 WHITEFIELD ST
FAIRFAX, VA 22032**

SCC ID NO: **06240626**

5.) STOCK INFORMATION

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

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10022 WHITEFIELD ST

CITY/ST/ZIP: FAIRFAX, VA 22032

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:	ROGER ORROCK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	3324 Floyd Avenue		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		

NAME:	KATHY WILSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2319 Sandel Lane		
CITY/ST/ZIP/CO:	WESTMINSTER, MD 21157		

NAME:	DIANA CLAYTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	10022 WHITEFIELD ST		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22032		

NAME:	KENNETH CLAYTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	10022 WHITEFIELD ST		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22032		

NAME:	KATHY DIMOND	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3324 Floyd Avenue		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		

NAME:	CHRISTA MCCHANCY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	14354 Brown Road		
CITY/ST/ZIP/CO:	Sabillasville, MD 21780		

NAME: LAURA COLOMBO TITLE: DIRECTOR ADDRESS: 9555 Pine Cluster Circle CITY/ST/ZIP/CO: VIENNA, VA 22181	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DIANE SPINELLI TITLE: DIRECTOR ADDRESS: 3400 Choate Court CITY/ST/ZIP/CO: WOODBRIDGE, VA 22193	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TONY VALLONE TITLE: PAST PRESIDENT ADDRESS: 14101 Sorrel Chase Court CITY/ST/ZIP/CO: CENTERVILLE, VA 20121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> 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.		
/s/ KENNETH CLAYTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KENNETH CLAYTON, TREASURER PRINTED NAME AND CORPORATE TITLE	8/3/2012 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.		