

1.) CORPORATION NAME:

Virginia Association of Governmental Emergency Medical Services Administrators

DUE DATE: **12/30/2010**

SCC ID NO: **06485163**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
MIKE HARMON
6731 MIMMS LOOP
PO BOX 40**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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CHESTERFIELD, VA 23832-40

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CHESTERFIELD COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6731 MIMMS LOOP
PO BOX 40

CITY/ST/ZIP: CHESTERFIELD, VA 23832-0040

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: LISA ATKINS
TITLE: TREASURER
ADDRESS: 12025 COURTHOUSE CIRCLE SUITE 400
PO BOX 40
CITY/ST/ZIP/CO: NEW KENT, VA 23124-

OFFICER

DIRECTOR

NAME: MELISSA K F. JOHNSON
TITLE: SECRETARY
ADDRESS: 300 MCLAWS CIRCLE STE 200
CITY/ST/ZIP/CO: WILLIAMSBURG, VA 23185-

OFFICER

DIRECTOR

NAME: DILLARD E FERGUSON
TITLE: 2nd VP
ADDRESS: PO BOX 306
CITY/ST/ZIP/CO: GOOCHLAND, VA 23063-

OFFICER

DIRECTOR

NAME: MATT TATUM
TITLE: 1st VP
ADDRESS: 1024 DUPONT ROAD
CITY/ST/ZIP/CO: MARTINSVILLE, VA 24112-4600

OFFICER

DIRECTOR

OFFICER DIRECTOR

NAME: MIKE HARMON
TITLE: DIRECTOR
ADDRESS: P O BOX 40
CITY/ST/ZIP/CO: CHESTERFIELD, VA 23832-

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/ LISA ATKINS	LISA ATKINS, TREASURER	2/9/2011
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.