

1.) CORPORATION NAME:

**THE AMERICAN UNIVERSITY OF PARIS ALUMNI CHAPTER  
OFGREATER WASHINGTON, DC**

DUE DATE: **2/28/2011**

SCC ID NO: **06537971**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
PEGGY H MONTGOMERY  
415 W BROAD ST  
FALLS CHURCH, VA 22046-3317**

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: 415 W BROAD ST

CITY/ST/ZIP: FALLS CHURCH, VA 22046-3317

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:	BRADFORD E AMADOR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	4631 LINMAR COURT		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22312-		
NAME:	DARRYL CROMPTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	801 PENNSYLVANIA AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20004-		
NAME:	PEGGY H MONTGOMERY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	415 W BROAD ST		
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22046-		
NAME:	CAREY H KLUTTZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1829 SUMMIT PLACE NW #203		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009-		
NAME:	ELIZABETH M GANSHERT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1829 SUMMIT PLACE NW #203		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20009-		

NAME: ASHLEY SMITH TITLE: SECRETARY ADDRESS: 1708 KILBOURNE PLACE NW CITY/ST/ZIP/CO: WASHINGTON, DC 20009-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: BERTHA JANE MCDUFFIE TITLE: EVENTS PLANNER ADDRESS: 200 K STREET NW #508 CITY/ST/ZIP/CO: WASHINGTON, DC 20001-	<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.

<u>/s/ CAREY H KLUTTZ</u>	<u>CAREY H KLUTTZ, PRESIDENT</u>	<u>1/7/2011</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.