

SCC eFile	2015 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	215540514
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1.) CORPORATION NAME: THE NATIONAL SPORTS MEDICINE INSTITUTE, P.C.	DUE DATE: 12/31/2015				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DAVID C JOHNSON 19455 DEERFIELD AVE STE 312 LANSDOWNE, VA	SCC ID NO: 06694335				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				
4.) STATE OR COUNTRY OF INCORPORATION: VA					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 19455 DEERFIELD AVE STE 312

CITY/ST/ZIP: LANSDOWNE, VA 20176

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 checked="" type="checkbox"/> DIRECTOR
NAME: DAVID C JOHNSON MD TITLE: OFF/DIR ADDRESS: 19455 DEERFIELD AVE, SUITE 312 CITY/ST/ZIP/CO: LANSDOWNE, VA 20176		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TIMOTHY S JOHNSON MD TITLE: DIRECTOR ADDRESS: 19455 DEERFIELD AVE, SUITE 312 CITY/ST/ZIP/CO: LANSDOWNE, MD 20176		

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/ DAVID C JOHNSON MD	DAVID C JOHNSON MD, OFF/DIR	11/3/2015
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.