

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212528520
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1.) CORPORATION NAME: MCGUIRE WILLIAMS INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KATHLEEN B HUSTON 6155 FULLER CT STE 2 ALEXANDRIA, VA 22310-2541 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: VA	DUE DATE: 7/31/2012 SCC ID NO: 06805725 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>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6155 FULLER CT STE 2
 CITY/ST/ZIP: ALEXANDRIA, VA 22310

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: KATHLEEN B. HUSTON TITLE: P/D ADDRESS: 912 Main Street CITY/ST/ZIP/CO: Edmonds, WA 98020	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: ANGELA R. WILLIAMS TITLE: VP/D ADDRESS: 10330 LAUNCH CIR #201 CITY/ST/ZIP/CO: MANASSAS, VA 20109	<input checked="" type="checkbox"/> OFFICER <input checked="" 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/ ANGELA R. WILLIAMS	ANGELA R. WILLIAMS, VP/D	7/27/2012
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.