

1.) CORPORATION NAME:

**Nora's Garden, Incorporated**

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

SCC ID NO: **06908925**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
PATRICIA ANN MEYERS  
115 BUXTON RD  
FALLS CHURCH, VA 22046**

5.) STOCK INFORMATION

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

**FALLS CHURCH CITY (FILED IN ARLINGTON COUNTY)**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 115 BUXTON RD

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

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: THOMAS M HEMPHILL  
TITLE: CHAIRMAN  
ADDRESS: 115 BUXTON RD  
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22046-

OFFICER

DIRECTOR

NAME: PATRICIA ANN MEYERS  
TITLE: SECRETARY  
ADDRESS: 115 BUXTON RD  
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22046-

OFFICER

DIRECTOR

NAME: ROBERT W SNEE  
TITLE: VICE CHAIRMAN  
ADDRESS: 205 N CAMERON ST  
CITY/ST/ZIP/CO: STERLING, VA 20164-

OFFICER

DIRECTOR

NAME: KATIE EMMONS  
TITLE: DIRECTOR  
ADDRESS: 207 W GEORGE MASON DRIVE  
CITY/ST/ZIP/CO: FALLS CHURCH, VA 22046-

OFFICER

DIRECTOR

NAME: MICHAEL HOOVER  
TITLE: DIRECTOR  
ADDRESS: 6000 LIBERTY BELL COURT  
CITY/ST/ZIP/CO: BURKE, VA 22015-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN DOVELL MAYNARD DIRECTOR 611 E. COLUMBIA ST. FALLS CHURCH, VA 22046-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT NISSEN DIRECTOR 4500 MIDDLE RIDGE DR. FAIRFAX, VA 22033-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIM GUY DIRECTOR 300 PARK AVE. FALLS CHURCH, VA 22046-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RUTH RODGERS TREASURER 105 BUXTON ROAD FALLS CHURCH, VA 22046-	<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/ PATRICIA ANN MEYERS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PATRICIA ANN MEYERS, SECRETARY PRINTED NAME AND CORPORATE TITLE	1/27/2011 DATE
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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.