

1.) CORPORATION NAME:

**Fairfax County Police Explorer Post #1742**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
TRACI SONTHEIMER  
4100 CHAIN BRIDGE RD  
FAIRFAX, VA 22030**

SCC ID NO: **07029770**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX CITY (FILED IN FAIRFAX COUNTY)**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4100 CHAIN BRIDGE ROAD

CITY/ST/ZIP: FAIRFAX, VA 22030-

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: MIRCHELLE ENRIGHT  
TITLE: DIR/VP  
ADDRESS: 4100 CHAIN BRIDGE RD  
CITY/ST/ZIP/CO: FAIRFAX, VA 22030-

OFFICER

DIRECTOR

NAME: KEVIN HORAN  
TITLE: DIR/SEC  
ADDRESS: 4100 CHAIN BRIDGE RD  
CITY/ST/ZIP/CO: FAIRFAX, VA 22030-

OFFICER

DIRECTOR

NAME: TRACI SONTHEIMER  
TITLE: DIR/TREAS  
ADDRESS: 4100 CHAIN BRIDGE RD  
CITY/ST/ZIP/CO: FAIRFAX, VA 22030-

OFFICER

DIRECTOR

NAME: WILLIAM RIDGEWAY  
TITLE: DIRECTOR  
ADDRESS: 4100 CHAIN BRIDGE RD.  
CITY/ST/ZIP/CO: FAIRFAX, VA 22030-

OFFICER

DIRECTOR

NAME: TED ARNN  
TITLE: DIR/PRES  
ADDRESS: 4100 CHAIN BRIDGE RD.  
CITY/ST/ZIP/CO: FAIRFAX, VA 22030-

OFFICER

DIRECTOR

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/ TRACI SONTHEIMER	TRACI SONTHEIMER, DIR/TREAS	11/12/2010
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.		