

1.) CORPORATION NAME:

NEXOLVE Corporation

DUE DATE: **12/31/2011**

SCC ID NO: **07032113**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12015 LEE JACKSON HWY

CITY/ST/ZIP: FAIRFAX, VA 22033-

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: LOUIS M ADDEO
TITLE: PRESIDENT
ADDRESS: 12015 LEE JACKSON HIGHWAY
CITY/ST/ZIP/CO: FAIRFAX, VA 22033-

OFFICER

DIRECTOR

NAME: EDMUND M GLABUS
TITLE: SR VP
ADDRESS: 12015 LEE JACKSON HIGHWAY
CITY/ST/ZIP/CO: FAIRFAX, VA 22033-

OFFICER

DIRECTOR

NAME: BONNIE J COOK
TITLE: SR VP
ADDRESS: 12015 LEE JACKSON HIGHWAY
CITY/ST/ZIP/CO: FAIRFAX, VA 22033-

OFFICER

DIRECTOR

NAME: CHRISTINE A LANCASTER
TITLE: SECRETARY
ADDRESS: 12015 LEE JACKSON HWY
CITY/ST/ZIP/CO: FAIRFAX, VA 22033-

OFFICER

DIRECTOR

NAME: JAY W ROMYN
TITLE: TREASURER
ADDRESS: 12015 LEE JACKSON HWY
CITY/ST/ZIP/CO: FAIRFAX, VA 22033-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J. FITZGERALD VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARGARITA MENTUS VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIMMY R. GRUSSMEYER VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES D. MOORE VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL L. POLMAR VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD L. STONE VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033-	<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.

/s/ JAY W ROMYN	JAY W ROMYN, TREASURER	11/26/2011
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.