

1.) CORPORATION NAME:

National Student Clearinghouse Research Center

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI NATIONAL STUDENT CLEARINGHOUSE 2300 DULLES STATION BLVD HERNDON, VA 20171**

DUE DATE: **11/30/2011**

SCC ID NO: **07156417**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2300 DULLES STATION BLVD
SUITE 300

CITY/ST/ZIP: HERNDON, VA 20171-

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 type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JONI FINNEY	
TITLE:	DIRECTOR	
ADDRESS:	3700 WALNUT ST	
CITY/ST/ZIP/CO:	PHILADELPHIA, PA 19104-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DORIS GROSE	
TITLE:	DIRECTOR	
ADDRESS:	8960 CLIFFSIDE LANE	
CITY/ST/ZIP/CO:	FAIR OAKS, CA 95628-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KEITH JEPSEN	
TITLE:	DIRECTOR	
ADDRESS:	630 THIRD AVE 15TH FLOOR	
CITY/ST/ZIP/CO:	NEW YORK, NY 10017-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID LONGANECKER	
TITLE:	DIRECTOR	
ADDRESS:	3035 CENTER GREEN DR #200	
CITY/ST/ZIP/CO:	BOULDER, CO 80301-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DONALD HOSSLER	
TITLE:	Exec Director	
ADDRESS:	2300 DULLES STATION BOULEVARD SUITE 300	
CITY/ST/ZIP/CO:	HERNDON, VA 20171-	

NAME: ROBERTA HYLAND TITLE: SECRETARY ADDRESS: 2300 DULLES STATION BLVD SUITE 300 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JAY JAGOLTA TITLE: TREASURER ADDRESS: 2300 DULLES STATION BOULEVARD SUITE 300 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: PAUL LINGENFELTER TITLE: DIRECTOR ADDRESS: 3034 CENTER GREEN DR #100 CITY/ST/ZIP/CO: BOULDER, CO 80301-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: WALTER BUMPHUS TITLE: DIRECTOR ADDRESS: 1 DUPONT CIRCLE, NW, SUITE 410 CITY/ST/ZIP/CO: WASHINGTON, DC 20036-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: DANIEL DOMENECH TITLE: DIRECTOR ADDRESS: 801 N QUINCY ST STE 700 CITY/ST/ZIP/CO: ARLINGTON, VA 22203-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: DEBORAH SANTIAGO TITLE: DIRECTOR ADDRESS: 1717 N STREET, NW, 2ND FLOOR CITY/ST/ZIP/CO: WASHINGTON, DC 20036-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> 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/ ROBERTA HYLAND	ROBERTA HYLAND, SECRETARY	10/3/2011
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.		