

1.) CORPORATION NAME:

Virginia ESL Supervisor's Association

DUE DATE: **3/31/2011**

SCC ID NO: **07204852**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR
VALERIE P GOOSS
3820 NINE MILE RD
HENRICO, VA 23223**

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9000 TUDOR LANE

CITY/ST/ZIP: MANASSAS, VA 20110-

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: MEGAN MOORE
TITLE: PRESIDENT
ADDRESS: 9000 TUDOR LANE
CITY/ST/ZIP/CO: MANASSAS, VA 20110-

OFFICER

DIRECTOR

NAME: PHYLLIS GIASSON
TITLE: TREASURER
ADDRESS: 14575 POTOMAC BRIDGE DRIVE
CITY/ST/ZIP/CO: WOODBRIDGE, VA 22191-

OFFICER

DIRECTOR

NAME: JONI POFF
TITLE: SECRETARY
ADDRESS: 143 POOR FARM ROAD
CITY/ST/ZIP/CO: FINCASTL, VA 24090-

OFFICER

DIRECTOR

NAME: VALERIE P GOOSS
TITLE: Past Pres
ADDRESS: 3704 MEADOW RUN CT
CITY/ST/ZIP/CO: GLEN AILEN, VA 23060-

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/ VALERIE P GOOSS

VALERIE P GOOSS, Past Pres

5/25/2011

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.