

1.) CORPORATION NAME:

**Tene Associates, Inc.**

DUE DATE: **6/30/2011**

SCC ID NO: **07247208**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
WALTER M. SHOWERS  
6422 GROVEDALE DR  
SUITE 102-B**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	25,000
COMB	5,000

**ALEXANDRIA, VA 22310**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FAIRFAX COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6422 GROVEDALE DR  
SUITE 102-B

CITY/ST/ZIP: ALEXANDRIA, VA 22310-

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: WALTER M SHOWERS  
TITLE: CHAIRMAN  
ADDRESS: 5714 GLENMULLEN PL  
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22303-

OFFICER  DIRECTOR

NAME: PRINCESS S SHOWERS  
TITLE: VICE CHAIRMAN  
ADDRESS: 5714 GLENMULLEN PL  
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22310-

OFFICER  DIRECTOR

NAME: PRINCESS S SHOWERS  
TITLE: PRESIDENT  
ADDRESS: 5714 GLENMULLEN PL  
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22301-

OFFICER  DIRECTOR

NAME: WALTER M SHOWERS  
TITLE: TREASURER  
ADDRESS: 5714 GLENMULLEN PL  
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22303-

OFFICER  DIRECTOR

NAME: PRINCESS S SHOWERS  
TITLE: Secretary  
ADDRESS: 5714 GLENMULLEN PL  
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22303-

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.

<u>/s/ PRINCESS S SHOWERS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>PRINCESS S SHOWERS, VICE CHAIRMAN</u> PRINTED NAME AND CORPORATE TITLE	<u>7/25/2011</u> 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.