

1.) CORPORATION NAME:

Aerospace Medical Association

DUE DATE: **8/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PRISCILLA G BORNMANN
100 N PITT ST STE 200
ALEXANDRIA, VA 22314**

SCC ID NO: **07410145**

5.) STOCK INFORMATION

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

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 320 South Henry Street

CITY/ST/ZIP: Alexandria, VA 22314

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: P. Glenn Merchant TITLE: PRESIDENT ADDRESS: 2728 Glenn Arbor Drive CITY/ST/ZIP/CO: Colorado Springs, CO 80920	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: James T. Webb TITLE: PRES.-ELECT ADDRESS: 13818 Chittim Oak CITY/ST/ZIP/CO: San Antonio, TX 78232	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Mark R. Campbell TITLE: VICE PRESIDENT ADDRESS: 420 NORTH COLLEGIATE DRIVE #300 CITY/ST/ZIP/CO: PARIS, TX 75460	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Charles R. Fisher TITLE: VICE PRESIDENT ADDRESS: 2623 Rogers Bluff CITY/ST/ZIP/CO: San Antonio, TX 78258	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PHILIP J SCARPA, JR. TITLE: VICE PRESIDENT ADDRESS: MAIL CODE TA-B1A CITY/ST/ZIP/CO: NASA-KENNEDY SPACE CNTR, FL 32899	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Jeffrey C. Sventek TITLE: DIRECTOR ADDRESS: 320 South Henry Street CITY/ST/ZIP/CO: Alexandria, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Estrella M. Forster TITLE: PRESIDENT ADDRESS: 1331 N. Bittercreek Terrace CITY/ST/ZIP/CO: Mustang, OK 73064	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Hernando J. Ortega TITLE: TREASURER ADDRESS: 415 Kokomo Street CITY/ST/ZIP/CO: San Antonio, TX 78209	<input checked="" 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/ Jeffrey C.Sventek SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Jeffrey C.Sventek, PRINTED NAME AND CORPORATE TITLE	6/27/2012 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.		