

1.) CORPORATION NAME: <b>Institute of Internal Auditors - Tidewater Chapter</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>ANTHONY J MARKUN          AUDIT SERVICES DEPARTMENT          306 CEDAR ROAD           CHESAPEAKE, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>CHESAPEAKE CITY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	DUE DATE: <b>6/30/2015</b>  SCC ID NO: <b>07528581</b>  5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: AUDIT SERVICES 306 CEDAR ROAD  CITY/ST/ZIP: CHESAPEAKE, VA 23322	
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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: LUVIC PRESTO TITLE: PRESIDENT ADDRESS: PORTFOLIO RECOVERY ASSOCIATES, SUITE 100 120 CORPORATE BOULEVARD CITY/ST/ZIP/CO: NORFOLK, VA 23502	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: MARK CRIST TITLE: FINANCIAL SEC. ADDRESS: 306 CEDAR RD CITY/ST/ZIP/CO: CHESAPEAKE, VA 23322	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: ANTHONY J MARKUN TITLE: TREASURER ADDRESS: 306 CEDAR RD CITY/ST/ZIP/CO: CHESAPEAKE, VA 23322	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: MONICA ANDERSON TITLE: DIRECTOR ADDRESS: 629 MONTEBELLO CIRCLE CITY/ST/ZIP/CO: CHESAPEAKE, VA 23322	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: CHERYL JACKSON TITLE: DIRECTOR ADDRESS: AUDIT SERVICES DEPARTMENT 306 CEDAR ROAD CITY/ST/ZIP/CO: CHESAPEAKE, VA 23322	<input type="checkbox"/>	OFFICER	<input checked="" 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/ LUVIC PRESTO	LUVIC PRESTO, PRESIDENT	10/30/2015
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.		