

1.) CORPORATION NAME:

**NATIONAL ASSOCIATION OF CHILDREN'S HOSPITALS  
ANDRELATED INSTITUTIONS, INC.**

DUE DATE: **12/31/2011**

SCC ID NO: **F0496804**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
LAWRENCE A MCANDREWS  
401 WYTHE ST  
ALEXANDRIA, VA 22314**

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:

**GA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 WYTHE ST

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:	LAWRENCE A. MCANDREWS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	401 WYTHE STREET		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314-		

NAME:	AMY MANSUE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	401 WYTHE ST		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314-		

NAME:	CHRISTOPHER DUROVICH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	401 WYTHE ST		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314-		

NAME:	JAMES MANDELL MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	401 WYTHE ST		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314-		

NAME:	HERMAN GRAY MD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	401 WYTHE ST		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314-		

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/ LAWRENCE A. MCANDREWS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>LAWRENCE A. MCANDREWS, PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>12/1/2011</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.