

1.) CORPORATION NAME:

**CLARK ENTERPRISES, INC. OF VIRGINIA (USED IN VA.BY:
CLARK ENTERPRISES, INC.)**

DUE DATE: **12/31/2012**

SCC ID NO: **F1023011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	5,000
COMNV	50,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7500 OLD GEORGETOWN RD

CITY/ST/ZIP: BETHESDA, MD 20814

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 C NUSSDORF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/T		
ADDRESS:	7500 OLD GEORGETOWN RD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	ROBERT J FLANAGAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EX VP		
ADDRESS:	7500 OLD GEORGETOWN ROAD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	SUSAN COCHRAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST VP		
ADDRESS:	7500 OLD GEORGETOWN ROAD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	LESLEY-JANE DIXON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	7500 OLD GEORGETOWN RD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	RICHARD DODD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST. VP		
ADDRESS:	7500 OLD GEORGETOWN RD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME:	TERRI D KLATZKIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	7500 OLD GEORGETOWN RD		
CITY/ST/ZIP/CO:	BETHESDA, MD 20814		

NAME: DAWN H. SILVA TITLE: ASST. VP ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: REBECCA L. OWEN TITLE: SVP/AS ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: A JAMES CLARK TITLE: COB ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES J. BRINKMAN TITLE: SVP ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CONNIE B. PUMPHREY TITLE: SECRETARY ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: COURTNEY CLARK-PASTRICK TITLE: DIRECTOR ADDRESS: 7500 OLD GEORGETOWN RD CITY/ST/ZIP/CO: BETHESDA, MD 20814	<input 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/ LAWRENCE C NUSSDORF SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LAWRENCE C NUSSDORF, P/T PRINTED NAME AND CORPORATE TITLE	12/6/2012 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.		