

1.) CORPORATION NAME:

SOCIETY FOR TECHNICAL COMMUNICATION, INC.

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LEO S FISHER
2300 WILSON BLVD 7TH FL
ARLINGTON, VA**

SCC ID NO: **F1043720**

5.) STOCK INFORMATION

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

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9401 LEE HWY
STE 300

CITY/ST/ZIP: FAIRFAX, VA 22031-1803

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:	Nicoletta A. Bleiel	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		
NAME:	Katherine Brown-Hoekstra	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		
NAME:	Jane Wilson	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, CA 22031		
NAME:	Chris Lyons	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		
NAME:	Alyssa Fox	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		
NAME:	Ben Woelk	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9401 LEE HIGHWAY #300		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		

NAME: Ray Gallon TITLE: DIRECTOR ADDRESS: 9401 LEE HIGHWAY #300 CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Bernard Aschwanden TITLE: DIRECTOR ADDRESS: 9401 LEE HIGHWAY #300 CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Deanne Levander TITLE: DIRECTOR ADDRESS: 9401 LEE HIGHWAY #300 CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Alan Houser TITLE: IPP ADDRESS: 9401 LEE HIGHWAY #300 CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<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/ Nicoletta A. Bleiel	Nicoletta A. Bleiel, PRESIDENT	5/21/2013
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.		