

1.) CORPORATION NAME:

MARINE SPILL RESPONSE CORPORATION

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

DUE DATE: **1/31/2011**

SCC ID NO: **F1095811**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:
TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 220 SPRING ST
STE 500

CITY/ST/ZIP: HERNDON, VA 20170-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	STEVEN BENZ	
TITLE:	PRESIDENT	
ADDRESS:	220 SPRING ST STE 500	
CITY/ST/ZIP/CO:	HERNDON, VA 20170-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DOUGLAS J. FERRARI	
TITLE:	VP/T	
ADDRESS:	220 SPRING ST STE 500	
CITY/ST/ZIP/CO:	HERNDON, VA 20170-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL J SAMPLE	
TITLE:	VP/SEC	
ADDRESS:	220 SPRING ST STE 500	
CITY/ST/ZIP/CO:	HERNDON, VA 20170-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DONALD A. TOENSHOFF JR	
TITLE:	EXEC VP	
ADDRESS:	220 SPRING ST STE 500 STE 500	
CITY/ST/ZIP/CO:	HERNDON, VA 20170-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL G WALKER	
TITLE:	VICE PRESIDENT	
ADDRESS:	400 N. SAM HOUSTON PKWY E SUITE 204	
CITY/ST/ZIP/CO:	HOUSTON, TX 77060-	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOE BOWLES VICE PRESIDENT 1330 INDUSTRY ST #100 EVERETT, WA 98203-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT MORRIS VICE PRESIDENT 702 NATIONAL CT RICHMOND, CA 94804-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN SWIFT VICE PRESIDENT 220 SPRING ST SUITE 500 HERNDON, VA 20170-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINE MURPHY ASST TREASURER 220 SPRING ST SUITE 500 HERNDON, VA 20170-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CURRENTLY VACANT ASST SECRETARY 220 SPRING ST SUITE 500 HERNDON, VA 20170-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRETT G DREWRY DIRECTOR 8777 N. GAINEY CTR DR SUITE 165 SCOTTSDALE, AZ 85258-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK KELLER DIRECTOR 366 CASTELLO RD LAFAYETTE, CA 94549-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL PLUTA DIRECTOR 2106 AINSDALE CT WILMINGTON, NC 28405-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT YANCEY DIRECTOR 11728 FLEMISH MILL CT OAKTON, VA 22124-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	JOHN V ZIMMER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11152 CONESTOGA CT		
CITY/ST/ZIP/CO:	OAKTON, VA 22124-		

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/ MICHAEL J SAMPLE	MICHAEL J SAMPLE, VP/SEC	1/3/2011
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.