

1.) CORPORATION NAME:

GREENHOST, INC.

DUE DATE: **10/31/2011**

SCC ID NO: **F1176769**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10900 BIRCHWOOD DR

CITY/ST/ZIP: KING GEORGE, VA 22485-

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: DAWN E PASQUIN
TITLE: PRESIDENT
ADDRESS: 800 LONG RIDGE ROAD
CITY/ST/ZIP/CO: STAMFORD, CT 06927-

OFFICER

DIRECTOR

NAME: JULIE A CAIAFA
TITLE: CFO/S/VP
ADDRESS: 10900 BIRCHWOOD DRIVE
CITY/ST/ZIP/CO: KING GEORGE, VA 22485-

OFFICER

DIRECTOR

NAME: CINDY FITZGERALD
TITLE: VICE PRESIDENT
ADDRESS: 800 LONG RIDGE ROAD
CITY/ST/ZIP/CO: STAMFORD, CT 06927-

OFFICER

DIRECTOR

NAME: CRISTOPHER N MATTESON
TITLE: VICE PRESIDENT
ADDRESS: 800 LONG RIDGE ROAD
CITY/ST/ZIP/CO: STAMFORD, CT 06927-

OFFICER

DIRECTOR

NAME: LINDA M FOWLER
TITLE: ASST SEC
ADDRESS: 800 LONG RIDGE ROAD
CITY/ST/ZIP/CO: STAMFORD, CT 06927-

OFFICER

DIRECTOR

NAME: MARYBETH CRONE TITLE: ASST SECRETARY ADDRESS: 800 LONG RIDGE ROAD CITY/ST/ZIP/CO: STAMFORD, CT 06927-	<input checked="" type="checkbox"/> OFFICER	<input 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/ LINDA M FOWLER	LINDA M FOWLER, ASST SEC	9/8/2011
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.