

1.) CORPORATION NAME:

**MEDSTAR HEALTH VISITING NURSE ASSOCIATION, INC.**

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: **5/31/2011**

SCC ID NO: **F1258617**

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:  
**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4061 POWDER MILL ROAD, SUITE 210

CITY/ST/ZIP: CALVERTON, MD 20705-

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 type="checkbox"/> DIRECTOR
NAME:	TRACI ANDERSON-ARAUJO	
TITLE:	PRESIDENT	
ADDRESS:	4061 POWDER MILL ROAD, SUITE 210	
CITY/ST/ZIP/CO:	CALVERTON, MD 20705-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	OLIVER M. JOHNSON II	
TITLE:	SECRETARY	
ADDRESS:	4061 POWDER MILL ROAD, SUITE 210	
CITY/ST/ZIP/CO:	CALVERTON, MD 20705-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARK MEGINNIS	
TITLE:	TREASURER	
ADDRESS:	4061 POWDER MILL ROAD, SUITE 210	
CITY/ST/ZIP/CO:	CALVERTON, VA 20705-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN J. LYNCH	
TITLE:	DIRECTOR	
ADDRESS:	4061 POWDER MILL ROAD, SUITE 210	
CITY/ST/ZIP/CO:	CALVERTON, MD 20705-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JEFFREY A. MATTON	
TITLE:	DIRECTOR	
ADDRESS:	4061 POWDER MILL ROAD, SUITE 210	
CITY/ST/ZIP/CO:	CALVERTON, MD 20705-	

OFFICER                       DIRECTOR

NAME:                                      ERIC R. WAGNER  
TITLE:                                        DIRECTOR  
ADDRESS:                                 4061 POWDER MILL ROAD, SUITE 210  
CITY/ST/ZIP/CO:                        CALVERTON, MD 20705-

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/ OLIVER M. JOHNSON II</u>	<u>OLIVER M. JOHNSON II,</u>	<u>4/15/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>SECRETARY</u> 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.