

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213508694

1.) CORPORATION NAME:

Sytex, Inc.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

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

SCC ID NO: **F1370222**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	20,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 700 N FREDERICK AVE

CITY/ST/ZIP: GAITHERSBURG, MD 20879

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: LINDA R GOODEN
 TITLE: PRESIDENT
 ADDRESS: 700 N FREDERICK AVE
 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20879

OFFICER

DIRECTOR

NAME: SCOTT W MACKAY
 TITLE: VICE PRESIDENT
 ADDRESS: 700 N FREDERICK AVE
 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20879

OFFICER

DIRECTOR

NAME: MARTIN T STANISLAV
 TITLE: VICE PRESIDENT
 ADDRESS: 700 N FREDERICK AVE
 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20879

OFFICER

DIRECTOR

NAME: SCOTT W MACKAY
 TITLE: SECRETARY
 ADDRESS: 700 N FREDERICK AVE
 CITY/ST/ZIP/CO: GAITHERSBURG, MD 20879

OFFICER

DIRECTOR

NAME: DONALD P MARTIN
 TITLE: ASST SECRETARY
 ADDRESS: 230 MALL BLVD
 BLDG 100, RM U4632
 CITY/ST/ZIP/CO: KINGS OF PRUSSIA, PA 19406

OFFICER

DIRECTOR

NAME: CHRISTINA EMENS
 TITLE: ASST SECRETARY
 ADDRESS: 2239 RT 70 W
 CITY/ST/ZIP/CO: CHERRY HILL, NJ 08002

OFFICER

DIRECTOR

NAME: KENNETH R POSSENRIEDE TITLE: VICE PRESIDENT ADDRESS: 6801 ROCKLEDGE DR CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: KENNETH R POSSENRIEDE TITLE: TREASURER ADDRESS: 6801 ROCKLEDGE DR CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: RENA H WHITNEY TITLE: ASST TREASURER ADDRESS: 6801 ROCKLEDGE DR CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: KATHY L ALLEN TITLE: ASST SECRETARY ADDRESS: 6801 ROCKLEDGE DR CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MARITZA CORDERO TITLE: ASST SECRETARY ADDRESS: 6801 ROCKLEDGE DR CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: LEONARD M HICKS TITLE: DIRECTOR ADDRESS: 12506 LAKE UNDERHILL RD CITY/ST/ZIP/CO: ORLANDO, FL 32825	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CRAIG E WELLER TITLE: VICE PRESIDENT ADDRESS: 700 N FREDERICK AVE CITY/ST/ZIP/CO: GAITHERSBURG, MD 20879	<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/ DONALD P MARTIN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DONALD P MARTIN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE
2/20/2013 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.	