

1.) CORPORATION NAME:

**Halon Recycling Corporation**

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**THOMAS A CORTINA  
1001 19TH STREET NORTH  
SUITE 1200**

SCC ID NO: **F1487026**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**ARLINGTON, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ARLINGTON COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2550 M ST NW

CITY/ST/ZIP: WASHINGTON, DC 20037

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:	RICHARD MARCUS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1100 HASKINS RD		
CITY/ST/ZIP/CO:	BOWLING GREEN, OH 43402		
NAME:	DAVE CATCHPOLE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	5901 BARRY AVE		
CITY/ST/ZIP/CO:	ANCHORAGE, AK 99507		
NAME:	THOMAS CORTINA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC DIR		
ADDRESS:	1001 19TH STREET NORTH SUITE 1200		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209		
NAME:	ROBIN BENNETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 3707 MC OR-MA		
CITY/ST/ZIP/CO:	SEATTLE, WA 98124		
NAME:	JOHN DEMETER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	108 LIBERTY STREET		
CITY/ST/ZIP/CO:	METUCHEN, NJ 08840		
NAME:	STEVE FANELLI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1800 HIGHLAND AVE		
CITY/ST/ZIP/CO:	DUARTE, CA 91010		

NAME:                   TIM JANNECK TITLE:                   DIRECTOR ADDRESS:               PO BOX 100360 700 G STREET CITY/ST/ZIP/CO:       ANCHORAGE, AK 99510	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:                   JOHN TRINAJSTICH TITLE:                   DIRECTOR ADDRESS:               4200 AIRPORT DRIVE CITY/ST/ZIP/CO:       WILSON, NC 27893-9643	<input 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/ THOMAS CORTINA SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	THOMAS CORTINA, EXEC DIR PRINTED NAME AND CORPORATE TITLE	11/1/2013 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.		