

|   |  |       |            |        |        |
|---|--|-------|------------|--------|--------|
| 1.) CORPORATION NAME:<br><b>PHANEUF ASSOCIATES INCORPORATED</b>   | DUE DATE: <b>4/30/2013</b>   |       |            |        |        |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>PEGGY A SWALVE<br/>         4900 SEMINARY RD STE 360<br/>         ALEXANDRIA, VA 22311</b> | SCC ID NO: <b>F1543844</b>   |       |            |        |        |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>ALEXANDRIA CITY</b>   | 5.) STOCK INFORMATION<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 10,000 |
| CLASS   | AUTHORIZED   |       |            |        |        |
| COMMON  | 10,000   |       |            |        |        |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>DC</b>   |  |       |            |        |        |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4900 SEMINARY RD STE 360

CITY/ST/ZIP: ALEXANDRIA, VA 22311

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: ROBIN J MEREDITH<br>TITLE: PRESIDENT<br>ADDRESS: 4900 SEMINARY RD STE 360<br>CITY/ST/ZIP/CO: ALEXANDRIA, VA 22311  | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: PEGGY A SWALVE<br>TITLE: VP/T<br>ADDRESS: 4900 SEMINARY RD STE 360<br>CITY/ST/ZIP/CO: ALEXANDRIA, VA 22311         | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: CHRISTA D BROLLEY<br>TITLE: SECRETARY<br>ADDRESS: 4900 SEMINARY RD STE 360<br>CITY/ST/ZIP/CO: ALEXANDRIA, VA 22311 | <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/ PEGGY A SWALVE                                  | PEGGY A SWALVE, VP/T             | 2/23/2013 |
| 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.