

1.) CORPORATION NAME: <b>Mercury Associates, Inc.</b>	DUE DATE: <b>3/31/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CORPORATION SERVICE COMPANY          Bank of America Center, 16th Floor          1111 East Main Street</b>	SCC ID NO: <b>F1580630</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>RICHMOND CITY</b>	5.) STOCK INFORMATION <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>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED				
COMMON	5,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>MD</b>					

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 16051 COMPRINT CIRCLE  CITY/ST/ZIP: GAITHERSBURG, MD 20877	
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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.
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NAME: PAUL T LAURIA TITLE: PRESIDENT ADDRESS: 16051 Comprint Circle CITY/ST/ZIP/CO: GAITHERSBURG, MD 20877	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: RANDALL G OWEN TITLE: SR VP/SEC ADDRESS: 16051 Comprint Circle CITY/ST/ZIP/CO: Gaithersburg, MD 20877	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: PAUL T LAURIA TITLE: TREASURER ADDRESS: 16051 Comprint Circle CITY/ST/ZIP/CO: Gaithersburg, MD 20877	<input checked="" type="checkbox"/> OFFICER	<input checked="" 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/ PAUL T LAURIA	PAUL T LAURIA, PRESIDENT	3/14/2013
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.