

1.) CORPORATION NAME:

National Marrow Donor Program

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI RALS VA, LLC**
7288 HANOVER GREEN DR
MECHANICSVILLE, VA 23111

DUE DATE: **7/31/2011**

SCC ID NO: **F1635863**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
CO

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3001 BROADWAY ST NE #500

CITY/ST/ZIP: MINNEAPOLIS, MN 55413-

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: GORDON BRYAN
TITLE: CFO
ADDRESS: 3001 BROADWAY ST NE #500
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55413-

OFFICER DIRECTOR

NAME: JEFFREY CHELL
TITLE: CEO
ADDRESS: 3001 BROADWAY ST NE #500
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55413-

OFFICER DIRECTOR

NAME: DENNIS CONFER
TITLE: CHIEF MED OFF
ADDRESS: 3001 BROADWAY ST NE #500
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55413-

OFFICER DIRECTOR

NAME: REBECCA LEWIS, ESQ
TITLE: CHAIRMAN
ADDRESS: 3001 BROADWAY ST. NE, 500
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55413-

OFFICER 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/ GORDON BRYAN

GORDON BRYAN, CFO

9/1/2011

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.