

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214528208

1.) CORPORATION NAME:

**C.C. JOHNSON & MALHOTRA, P.C.**

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARA MEDVIN MATTHEWS  
1313 JAMESTOWN RD STE 101  
WILLIAMSBURG, VA**

SCC ID NO: **F1668476**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**WILLIAMSBURG CITY (FILED IN JAMES CITY COUNTY)**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9891 BROKEN LAND PKWY  
STE 203

CITY/ST/ZIP: COLUMBIA, MD 21046-3000

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.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	ANIL AHUJA				
TITLE:	PRESIDENT				
ADDRESS:	TWO NORTH RIVERSIDE PLAZA				
	STE 1050				
CITY/ST/ZIP/CO:	CHICAGO, IL 60606				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	LI-TEH D CHANG				
TITLE:	SR. VP				
ADDRESS:	1025 CONNECTICUT AVE, NW				
	STE 1017				
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036-5405				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	GEORGE X JOSEPH				
TITLE:	VP/SECRETARY				
ADDRESS:	9891 BROKEN LAND PARKWAY				
	SUITE 203				
CITY/ST/ZIP/CO:	COLUMBIA, MD 21046-3000				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	DONALD H KOCH				
TITLE:	VICE PRESIDENT				
ADDRESS:	9891 BROKEN LAND PKWY				
	STE 203				
CITY/ST/ZIP/CO:	COLUMBIA, MD 21046-3000				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	S K MALHOTRA				
TITLE:	CEO/T/CFO/CHRMN				
ADDRESS:	3318 WINDSHADOW DRIVE				
CITY/ST/ZIP/CO:	ANN ARBOR, MI 48105				

NAME: CHARLES G. BABCOCK  OFFICER  DIRECTOR  
TITLE: SVP/COO  
ADDRESS: 4660 TRINDLE ROAD  
STE 103  
CITY/ST/ZIP/CO: CAMP HILL, PA 17011-5601

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.

<u>/s/ GEORGE X JOSEPH</u>	<u>GEORGE X JOSEPH,</u>	<u>5/30/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VP/SECRETARY 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.