

1.) CORPORATION NAME:

**PEER CONSULTANTS, P.C.**

DUE DATE: **11/30/2010**

SCC ID NO: **F1687963**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
CAROLYN MCCADDEN  
424 FERNWOOD FARMS RD  
CHESAPEAKE, VA 23320**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESAPEAKE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12300 TWINBROOK PARKWAY STE 410

CITY/ST/ZIP: ROCKVILLE, MD 20852-

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: LILIA A ABRON PHD\_PE  
TITLE: PRESIDENT  
ADDRESS: 12300 TWINBROOK PARKWAY STE 410  
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852-

OFFICER

DIRECTOR

NAME: JOHN W TUCKER JR\_PE  
TITLE: VICE PRESIDENT  
ADDRESS: 12300 TWINBROOK PARKWAY STE 410  
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852-

OFFICER

DIRECTOR

NAME: CHRISTIAN DAVIES VENN PHD PE  
TITLE: DIRECTOR  
ADDRESS: 12300 TWINBROOK PARKWAY STE 410  
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852-

OFFICER

DIRECTOR

NAME: JOHN W TUCKER JR, PE  
TITLE: DIRECTOR  
ADDRESS: 12300 TWINBROOK PARKWAY STE 41  
CITY/ST/ZIP/CO: ROCKVILLE, MD 20852-

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/ LILIA A ABRON PHD PE  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

LILIA A ABRON PHD\_PE,  
PRESIDENT  
PRINTED NAME AND CORPORATE  
TITLE

1/21/2011  
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.