

1.) CORPORATION NAME:

Koniag Services, Inc.

DUE DATE: **3/31/2012**

SCC ID NO: **F1701897**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS, INC.

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

AK

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4300 B STREET SUITE 408

CITY/ST/ZIP: ANCHORAGE, AK 99503-

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: ED O'HARE
TITLE: PRES/CEO
ADDRESS: 4100 LAFAYETTE CENTER DR SUITE 110
CITY/ST/ZIP/CO: CHANTILLY, VA 20151-

OFFICER

DIRECTOR

NAME: DON ARGETSINGER
TITLE: SECRETARY
ADDRESS: 4300 B STREET #408
CITY/ST/ZIP/CO: ANCHORAGE, AK 99503-

OFFICER

DIRECTOR

NAME: DEBBIE LUKIN
TITLE: ASST SECRETARY
ADDRESS: 4300 B STREET, #408
CITY/ST/ZIP/CO: ANCHORAGE, AK 99503-

OFFICER

DIRECTOR

NAME: JIM ERICKSON
TITLE: TREASURER
ADDRESS: 4300 B STREET SUITE 408
CITY/ST/ZIP/CO: ANCHORAGE, AK 99503-

OFFICER

DIRECTOR

NAME: THOMAS H PANAMAROFF
TITLE: DIR/CHAIRMAN
ADDRESS: 4300 B STREET #408
CITY/ST/ZIP/CO: ANCHORAGE, AK 99503-

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.

<u>/s/ DEBBIE LUKIN</u>	<u>DEBBIE LUKIN, ASST SECRETARY</u>	<u>3/17/2012</u>
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.