

1.) CORPORATION NAME: BNA WASHINGTON INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: DE	DUE DATE: 6/30/2012 SCC ID NO: F1713983 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>150</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	150
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1801 S BELL STREET

CITY/ST/ZIP: ARLINGTON, VA 22202

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: ELIZABETH F. ROWEN TITLE: TREAS/ASST SEC ADDRESS: 1801 S BELL STREET CITY/ST/ZIP/CO: ARLINGTON, VA 22202	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: PAUL N WOJCIK TITLE: COB ADDRESS: 1801 S BELL ST CITY/ST/ZIP/CO: ARLINGTON, VA 22202	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: LESLIE D HOLMES TITLE: DIRECTOR ADDRESS: 1801 S. BELL ST CITY/ST/ZIP/CO: ARLINGTON, VA 22202	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	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/ PAUL N WOJCIK	PAUL N WOJCIK, COB	6/11/2012
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.