

1.) CORPORATION NAME:

Avectra, Inc.

DUE DATE: **10/31/2011**

SCC ID NO: **F1724576**

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

**AUTH IN VI
CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	13,231,000
CONVPA	6,243,083

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7901 JONES BRANCH DRIVE
SUITE 500

CITY/ST/ZIP: MCLEAN, VA 22102-

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: BOB MICHELSON
TITLE: DIRECTOR
ADDRESS: 1033 SKOKIE BLVD #600
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

OFFICER DIRECTOR

NAME: RICHARD DAVIS
TITLE: CEO/PRES/CHAIR
ADDRESS: 7901 JONES BRANCH DR
STE 500
CITY/ST/ZIP/CO: MCLEAN, VA 22102-

OFFICER DIRECTOR

NAME: RUSS ODOM
TITLE: SECRETARY/TREAS
ADDRESS: 7901 JONES BRANCH DR
STE 500
CITY/ST/ZIP/CO: MCLEAN, VA 22102-

OFFICER DIRECTOR

NAME: DAN HOSLER
TITLE: DIRECTOR
ADDRESS: 1033 SKOKIE BLVD #600
CITY/ST/ZIP/CO: NORTHBROOK, IL 60062-

OFFICER DIRECTOR

NAME: ROB WADSWORTH TITLE: DIRECTOR ADDRESS: ONE FINANCIAL CENTER 44 FL CITY/ST/ZIP/CO: BOSTON, MA 02111-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BARRY MALEK TITLE: DIRECTOR ADDRESS: 19224 FISHER ISLAND DR CITY/ST/ZIP/CO: FISHER ISLAND, FL 33109-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JERRY JASINOWSKI TITLE: DIRECTOR ADDRESS: 3228 RITTENHOUSE ST NW CITY/ST/ZIP/CO: WASHINGTON, DC 20015-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BETSY ATKINS TITLE: DIRECTOR ADDRESS: 10 EDGEWATER DR, PH F CITY/ST/ZIP/CO: CORAL GABLES, FL 33133-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JOHN WRIGHT TITLE: DIRECTOR ADDRESS: 115 BLUE HERON RD CITY/ST/ZIP/CO: GEORGETOWN, SC 29440-	<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.		
<u>/s/ RUSS ODOM</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>RUSS ODOM, SECRETARY/TREAS</u> PRINTED NAME AND CORPORATE TITLE	<u>10/5/2011</u> 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.		