

1.) CORPORATION NAME:

**Neighborhood Associates Corporation**

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1798901**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 30TH STREET, NW, 4TH FLOOR

CITY/ST/ZIP: WASHINGTON, DC 20007

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:	MARILYN MELKONIAN	
TITLE:	PRESIDENT	
ADDRESS:	1101 30TH STREET NW 4TH FLOOR	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20007	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PATRICIA BROULLIRE	
TITLE:	SECRETARY	
ADDRESS:	1101 30TH ST NW	
CITY/ST/ZIP/CO:	4TH FLOOR WASHINGTON, DC 20007	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Gloria Cousar	
TITLE:	VICE PRESIDENT	
ADDRESS:	1101 30th Street NW	
CITY/ST/ZIP/CO:	4th Floor Washington, DC 20007	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Virginia Harrison	
TITLE:	DIRECTOR	
ADDRESS:	1101 30th Street NW	
CITY/ST/ZIP/CO:	4th Floor Washington, DC 20007	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	Sara E. Johnson	
TITLE:	DIRECTOR	
ADDRESS:	1101 30th Street NW	
CITY/ST/ZIP/CO:	4th Floor Washington, DC 20007	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	John Ritch	
TITLE:	DIRECTOR	
ADDRESS:	1101 30th Street NW	
CITY/ST/ZIP/CO:	4th Floor Washington, DC 20007	

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/ PATRICIA BROULLIRE</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>PATRICIA BROULLIRE, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>6/11/2013</u> DATE
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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.