

1.) CORPORATION NAME:

Health and Education for Haiti, Inc.

DUE DATE: **8/31/2011**

SCC ID NO: **F1799958**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
RICHARD P GUSTAFSON JR
3071 WHITE BIRCH CT
FAIRFAX, VA 22031**

5.) STOCK INFORMATION

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

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 16929 BRIARDALE ROAD

CITY/ST/ZIP: DERWOOD, MD 20855-

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: PAT LABUDA
TITLE: P/EXEC DIRECTOR
ADDRESS: 16929 BRIARDALE ROAD
CITY/ST/ZIP/CO: DERWOOD, MD 20855-

OFFICER

DIRECTOR

NAME: RICHARD GUSTAFSON
TITLE: TREASURER
ADDRESS: 3071 WHITE BIRCH COURT
CITY/ST/ZIP/CO: FAIRFAX, VA 22031-

OFFICER

DIRECTOR

NAME: MIKE GOGGIN
TITLE: DIRECTOR
ADDRESS: 415 MICHIGAN AVENUE NE
CITY/ST/ZIP/CO: WASHINGTON, DC 20017-

OFFICER

DIRECTOR

NAME: CHARLES MCCARTHY
TITLE: DIRECTOR
ADDRESS: 1309 LAWRENCE STREET NE
CITY/ST/ZIP/CO: WASHINGTON, DC 20017-

OFFICER

DIRECTOR

NAME: DR FRANK NICE
TITLE: DIRECTOR
ADDRESS: 7409 ALGONA CT
CITY/ST/ZIP/CO: DERWOOD, MD 20855-

OFFICER

DIRECTOR

OFFICER DIRECTOR

NAME: RALPH KUEHNER
TITLE: CHAIRMAN
ADDRESS: 6701 MUNCASTER MILL ROAD
CITY/ST/ZIP/CO: DERWOOD, MD 20855-

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/ RICHARD GUSTAFSON</u>	<u>RICHARD GUSTAFSON,</u>	<u>6/25/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>TREASURER</u> 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.