

1.) CORPORATION NAME:

**TechAmerica Foundation**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**VIRGINIA PROFESSIONAL SERVICES, LLC  
3850 Gaskins Rd., Suite 120  
Richmond, VA 23233**

SCC ID NO: **F1817628**

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:

**CA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, STE. 600

CITY/ST/ZIP: WASHINGTON, DC 20004

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:	BENJAMIN J. ADERSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004		
CITY/ST/ZIP/CO:			
NAME:	JENNIFER KERBER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004		
CITY/ST/ZIP/CO:			
NAME:	JEFFREY J. BATES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004		
CITY/ST/ZIP/CO:			
NAME:	ROBERT F. BENNETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004		
CITY/ST/ZIP/CO:			
NAME:	JULIE EVANS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004		
CITY/ST/ZIP/CO:			

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIMOTHY E. GUERTIN DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEIRDRE HANFORD DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL MONTICINO DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LUCINDA SANDERS DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID SANDERS DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES TRELEAVEN DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES WRIGHTSON DIRECTOR 601 PENNSYLVANIA AVE., NW NORTH BUILDING, STE. 600 WASHINGTON, DC 20004	<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/ BENJAMIN J. ADERSON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BENJAMIN J. ADERSON, SECRETARY PRINTED NAME AND CORPORATE TITLE	6/4/2012 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.			