

1.) CORPORATION NAME: PAXTON VAN LINES, INCORPORATED	DUE DATE: 2/29/2012						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: WILLIAM D PAXTON 5300 PORT ROYAL RD SPRINGFIELD, VA 22151	SCC ID NO: 00712406						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMAV</td> <td style="text-align: center;">5,000</td> </tr> <tr> <td>COMBNV</td> <td style="text-align: center;">5,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMAV	5,000	COMBNV	5,000
CLASS	AUTHORIZED						
COMAV	5,000						
COMBNV	5,000						
4.) STATE OR COUNTRY OF INCORPORATION: VA							

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 5300 PORT ROYAL RD CITY/ST/ZIP: SPRINGFIELD, VA 22151	
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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: FRED D PAXTON TITLE: PRESIDENT ADDRESS: 210 CARRWOOD DR CITY/ST/ZIP/CO: GREAT FALLS, VA 22066	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: WILLIAM D PAXTON TITLE: COO/TREAS ADDRESS: 9706 LOCUST HILL DRIVE CITY/ST/ZIP/CO: GREAT FALLS, VA 22066	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: DAVID S PAXTON TITLE: ASST TREASURER ADDRESS: 3509 PRINCE WILLIAM DR CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: DANIEL H CALLAHAN, JR TITLE: ASST SECRETARY ADDRESS: 9223 KRISTIN LANE CITY/ST/ZIP/CO: FAIRFAX, VA 22032	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: JOHN O PAXTON TITLE: SECRETARY ADDRESS: 47229 LONGWOOD COURT CITY/ST/ZIP/CO: STERLING, VA 20165	<input checked="" 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/ WILLIAM D PAXTON	WILLIAM D PAXTON, COO/TREAS	5/10/2012
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.