

1.) CORPORATION NAME:

**VIRGINIA FINANCIAL SERVICES CORPORATION**

DUE DATE: **5/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
ROBERT N BRADSHAW JR  
8600 MAYLAND DR  
RICHMOND, VA 23294**

SCC ID NO: **01211440**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8600 MAYLAND DR

CITY/ST/ZIP: RICHMOND, VA 23294-

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: ROBERT N BRADSHAW JR  
TITLE: P/CEO  
ADDRESS: 8600 MAYLAND DRIVE  
CITY/ST/ZIP/CO: RICHMOND, VA 23294-

OFFICER

DIRECTOR

NAME: DENNIS C WINFREE  
TITLE: TREASURER  
ADDRESS: 2016 JOHN ROLFE PKWY  
CITY/ST/ZIP/CO: RICHMOND, VA 23238-

OFFICER

DIRECTOR

NAME: LINDA S LOVING  
TITLE: EVP  
ADDRESS: 8600 MAYLAND DR  
CITY/ST/ZIP/CO: RICHMOND, VA 23294-

OFFICER

DIRECTOR

NAME: JASON ANGUS  
TITLE: DIRECTOR  
ADDRESS: PO BOX 18026  
CITY/ST/ZIP/CO: RICHMOND, VA 23226-

OFFICER

DIRECTOR

NAME: JOHN W ATKINS  
TITLE: PRESIDENT  
ADDRESS: PO BOX 1510  
CITY/ST/ZIP/CO: STAFFORD, VA 22555-

OFFICER

DIRECTOR

NAME:	JOHN O WATSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P. O. BOX 96		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22902-		
NAME:	W MONTY DISE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10800 MIDLOTHIAN TNPK #220		
CITY/ST/ZIP/CO:	RICHMOND, VA 23235-		
NAME:	VERNON R DIVERS, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P. O. BOX 1663		
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23327-		
NAME:	W THOMAS PARSONS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	P. O. BOX 1747		
CITY/ST/ZIP/CO:	BRISTOL, VA 24203-		
NAME:	MICHAEL F FUNKHOUSER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P. O. BOX 429		
CITY/ST/ZIP/CO:	WOODSTOCK, VA 22664-		
NAME:	EDWIN C KELLAM, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	141 BUSINESS PARK DRIVE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23462-		
NAME:	JEFFREY S KERXTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P. O. BOX 1467		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22038-		
NAME:	R DAVID PRIEST	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2570 GASKINS ROAD #B		
CITY/ST/ZIP/CO:	RICHMOND, VA 23238-		

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/ ROBERT N BRADSHAW JR</u>	<u>ROBERT N BRADSHAW JR, P/CEO</u>	<u>5/24/2011</u>
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.