

1.) CORPORATION NAME: CLARK VAN SERVICE, INC.	DUE DATE: 6/30/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: H WOODROW CROOK 229 MAIN ST SMITHFIELD, VA	SCC ID NO: 02573335				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ISLE OF WIGHT COUNTY	5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: VA	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>15,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	15,000
CLASS	AUTHORIZED				
COMMON	15,000				

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 1966

CITY/ST/ZIP: CHESAPEAKE, VA 23327-1966

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: ROBERT C HALL		
TITLE: PRESIDENT		
ADDRESS: 117 WILLIAMS STREET		
CITY/ST/ZIP/CO: HERTFORD, NC 27944		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANN MICHELLE BARBER		
TITLE: SEC/TREAS		
ADDRESS: 100 RIVER SHORE DRIVE		
CITY/ST/ZIP/CO: HERTFORD, NC 27944		

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/ ANN MICHELLE BARBER	ANN MICHELLE BARBER, SEC/TREAS	5/15/2014
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.