

1.) CORPORATION NAME:

**PSI PACKAGING SERVICES, INC.**

DUE DATE: **1/31/2012**

SCC ID NO: **02661460**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
DEVON C ANDERS  
1346 PLEASANTS DR STE 6  
HARRISONBURG, VA 22801**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**ROCKINGHAM COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2245 INDUSTRIAL DR

CITY/ST/ZIP: CONNELLSVILLE, VA 15425-

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: VERNON E LITZINGER  
TITLE: PRESIDENT  
ADDRESS: 975 LOCKE MOUNTAIN ROAD  
CITY/ST/ZIP/CO: HOLLIDAYSBURG, PA 16648-

OFFICER

DIRECTOR

NAME: JERRY F MORRIS  
TITLE: VICE PRESIDENT  
ADDRESS: 215 FAIRWAY DR  
CITY/ST/ZIP/CO: HARRISONBURG, VA 22802-

OFFICER

DIRECTOR

NAME: WAYNE B RUCK  
TITLE: S/T  
ADDRESS: 221 FAIRWAY DR  
CITY/ST/ZIP/CO: HARRISONBURG, VA 22802-

OFFICER

DIRECTOR

NAME: DEVON C. ANDERS  
TITLE: ASST SECTY  
ADDRESS: 2051 JAMES EVELYN LANE  
CITY/ST/ZIP/CO: HARRISONBURG, VA 22802-

OFFICER

DIRECTOR

NAME: MICHAEL A KIDD  
TITLE: ASST SECRETARY  
ADDRESS: 10921 KEMPER DRIVE  
CITY/ST/ZIP/CO: WILLIAMSPORT, MD 21795-

OFFICER

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.

<u>/s/ DEVON C. ANDERS</u>	<u>DEVON C. ANDERS, ASST SECTY</u>	<u>11/30/2011</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.