

1.) CORPORATION NAME:

Virginia Public Safety Alliance

DUE DATE: **6/30/2011**

SCC ID NO: **06960512**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

DIRECTOR

JOHN W JONES

701 E FRANKLIN ST STE 706

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 701 EAST FRANKLIN ST, STE 706

CITY/ST/ZIP: RICHMOND, VA 23219-

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: SHERIFF CHARLES E JET
TITLE: PRESIDENT
ADDRESS: PO BOX 189
CITY/ST/ZIP/CO: STAFFORD, VA 22555-

OFFICER

DIRECTOR

NAME: SHERIFF RALEIGH H ISAACS SR
TITLE: SECRETARY
ADDRESS: 150 N MAIN ST
CITY/ST/ZIP/CO: SUFFOLK, VA 23434-

OFFICER

DIRECTOR

NAME: SHERIFF VERNIE W FRANCIS JR
TITLE: TREASURER
ADDRESS: PO BOX 70
CITY/ST/ZIP/CO: COURTLAND, VA 23837-

OFFICER

DIRECTOR

NAME: JOHN W JONES
TITLE: Executive Direc
ADDRESS: 701 E FRANKLIN ST STE 706
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: SHERIFF RYANT L. WASHINGTON
TITLE: DIRECTOR
ADDRESS: PO BOX 113
CITY/ST/ZIP/CO: PALMYRA, VA 22963-

OFFICER

DIRECTOR

NAME: SHERIFF F. W. HOWARD, JR. TITLE: DIRECTOR ADDRESS: P.O. BOX 186 CITY/ST/ZIP/CO: NEW KENT, VA 23124-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SHERIFF J. D. DIGGS TITLE: DIRECTOR ADDRESS: P.O. BOX 99 CITY/ST/ZIP/CO: YORKTOWN, VA 23690-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SHERIFF BETH ARTHUR TITLE: DIRECTOR ADDRESS: 1425 N. COURTHOUSE RD #9100 CITY/ST/ZIP/CO: ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SHERIFF STEPHEN O. SIMPSON TITLE: DIRECTOR ADDRESS: 880 HARRISON ST SE CITY/ST/ZIP/CO: LEESBURG, VA 20175-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: SHERIFF JOHN WEISENBURGER TITLE: DIRECTOR ADDRESS: 417 CUMBERLAND ST CITY/ST/ZIP/CO: BRISTOL, VA 24201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ JOHN W JONES	JOHN W JONES, Executive Direc	5/16/2011
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.