

1.) CORPORATION NAME:

Virginia Public Safety Alliance

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOHN W JONES
701 E FRANKLIN ST STE 706
RICHMOND, VA**

SCC ID NO: **06960512**

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 RYANT L. WASHINGTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 113		
CITY/ST/ZIP/CO:	PALMYRA, VA 22963		
NAME:	SHERIFF Brian K. Roberts	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	P.O. BOX 705		
CITY/ST/ZIP/CO:	Lawrenceville, VA 23868		
NAME:	SHERIFF RALEIGH H ISAACS SR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	150 N MAIN ST		
CITY/ST/ZIP/CO:	SUFFOLK, VA 23434		
NAME:	JOHN W JONES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXECUTIVE DIREC		
ADDRESS:	701 E FRANKLIN ST STE 706		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	SHERIFF BETH ARTHUR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1425 N. COURTHOUSE RD #9100		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201		
NAME:	SHERIFF J. D. DIGGS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	P.O. BOX 99		
CITY/ST/ZIP/CO:	YORKTOWN, VA 23690		

NAME: SHERIFF Steve M. Draper TITLE: DIRECTOR ADDRESS: P.O. Box 1326 CITY/ST/ZIP/CO: Martinsville, VA 24114	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHERIFF ARTHUR TOWNSEND, JR. TITLE: DIRECTOR ADDRESS: 160 COURTHOUSE SQ CITY/ST/ZIP/CO: LUNENBURG, VA 23952	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHERIFF RICHARD A. VAUGHAN TITLE: DIRECTOR ADDRESS: P.O. BOX 160 CITY/ST/ZIP/CO: INDEPENDENCE, VA 24348	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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
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 SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN W JONES, EXECUTIVE DIREC PRINTED NAME AND CORPORATE TITLE	4/24/2013 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.		