

1.) CORPORATION NAME:

Virginia Public Safety Alliance

DUE DATE: **6/30/2014**

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHERIFF Beth Arthur	
TITLE:	PRESIDENT	
ADDRESS:	1425 N. Courthouse Rd, #9100	
CITY/ST/ZIP/CO:	Arlington, VA 22201	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHERIFF BRIAN K. ROBERTS	
TITLE:	DIRECTOR	
ADDRESS:	P.O. BOX 705	
CITY/ST/ZIP/CO:	LAWRENCEVILLE, VA 23868	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHERIFF RALEIGH H ISAACS SR	
TITLE:	SECRETARY	
ADDRESS:	150 N MAIN ST	
CITY/ST/ZIP/CO:	SUFFOLK, VA 23434	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN W JONES	
TITLE:	EXECUTIVE DIREC	
ADDRESS:	701 E FRANKLIN ST STE 706	
CITY/ST/ZIP/CO:	RICHMOND, VA 23219	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHERIFF Gabe A. Morgan	
TITLE:	TREASURER	
ADDRESS:	224 26th St	
CITY/ST/ZIP/CO:	Newport News, VA 23607	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHERIFF STEVE M. DRAPER	
TITLE:	DIRECTOR	
ADDRESS:	P.O. BOX 1326	
CITY/ST/ZIP/CO:	MARTINSVILLE, VA 24114	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHERIFF ARTHUR TOWNSEND, JR. DIRECTOR 160 COURTHOUSE SQ LUNENBURG, VA 23952	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHERIFF RICHARD A. VAUGHAN DIRECTOR P.O. BOX 160 INDEPENDENCE, VA 24348	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHERIFF JOHN WEISENBURGER DIRECTOR 417 CUMBERLAND ST BRISTOL, VA 24201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sheriff B. J. Roberts DIRECTOR 1928 West Pembroke Ave Hampton, VA 23661	<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 <hr/> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN W JONES, EXECUTIVE DIREC <hr/> PRINTED NAME AND CORPORATE TITLE	5/22/2014 <hr/> 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.			