

1.) CORPORATION NAME: **VIRGINIA TSM CORPORATION (USED IN VA. BY: TSMCORPORATION)** DUE DATE: **12/31/2012**  
 SCC ID NO: **F0398802**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	6,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION: **TN**

6.) PRINCIPAL OFFICE ADDRESS:  
 ADDRESS: 7622 BARTLET CORP DR  
 STE 101  
 CITY/ST/ZIP: BARTLETT, TN 38133

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 W. GREEN		
TITLE: PRES/TREAS		
ADDRESS: 6076 MAIDEN LANE		
CITY/ST/ZIP/CO: MEMPHIS, TN 38120		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT W. GREEN		
TITLE: PRESIDENT/TREAS		
ADDRESS: 6076 MAIDEN LANE		
CITY/ST/ZIP/CO: MEMPHIS, TN 38120		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RICHARD M ANSPACH		
TITLE: VICE PRESIDENT		
ADDRESS: 4114 CROSSGATE DRIVE		
CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22408		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: WALTER G BESSER		
TITLE: VICE PRESIDENT		
ADDRESS: 4950 WORTHINGTON		
CITY/ST/ZIP/CO: CIRCLE ROCKLEDGE, FL 32955		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: LOUIS C CARETTI		
TITLE: VICE PRESIDENT		
ADDRESS: 2011 GUARDFISH		
CITY/ST/ZIP/CO: SILVERDALE, WA 98315		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RICHARD S HASSAN		
TITLE: VICE PRESIDENT		
ADDRESS: 1901 TOLL BRIDGE COURT		
CITY/ST/ZIP/CO: ALEXANDRIA, VA 22308		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD LINTHICUM VICE PRESIDENT 3043 HERON PLACE CLEARWATER, FL 33762	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CRAIG MCDONALD VICE PRESIDENT 409 NAVY COVE BLVD GULF BREEZE, FL 32561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN R. MOORE VICE PRESIDENT 5633 TOURNAMENT DR HAYMARKET, VA 20169	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CRAIG H SMITH VICE PRESIDENT 644 MISTY PINE DRIVE VENICE, FL 34292	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LINDA R. GREEN SECRETARY 6076 MAIDEN LANE MEMPHIS, TN 38120	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANNA E BLACKBURN DIRECTOR 1923 COLFAX EVANSTON, IL 60201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RUTH E TUTOR DIRECTOR 553 Valleybrook Drive MEMPHIS, TN 38120	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MIKE S TUTOR DIRECTOR 553 Valleybrook Drive MEMPHIS, TN 38120	<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/ ROBERT W. GREEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ROBERT W. GREEN, PRES/TREAS PRINTED NAME AND CORPORATE TITLE	12/11/2012 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.			