

1.) CORPORATION NAME:

SECURITY PACIFIC HOUSING SERVICES, INC.

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

DUE DATE: **3/31/2011**

SCC ID NO: **F0452260**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

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

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 N TRYON ST
NC1-021-02-20

CITY/ST/ZIP: CHARLOTTE, NC 28255-

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: BRENDA S STAPP
TITLE: TREASURER
ADDRESS: 401 N TRYON ST
NC1-021-02-20
CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

OFFICER DIRECTOR

NAME: DONNA DESOUZA
TITLE: SVP
ADDRESS: 401 N TRYON ST
NC1-021-02-20
CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

OFFICER DIRECTOR

NAME: CONNIE B SMITH
TITLE: SECRETARY
ADDRESS: 401 N TRYON ST
NC1-021-02-20
CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

OFFICER DIRECTOR

NAME: STEVE J. FRY
TITLE: PRESIDENT
ADDRESS: 401 N TRYON ST
NC1-021-02-20
CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

OFFICER DIRECTOR

NAME: CRAIG R. ROSATO TITLE: DIRECTOR ADDRESS: 401 N TRYON ST NC1-021-02-20 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-	<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.

<u>/s/ DONNA DESOUZA</u>	<u>DONNA DESOUZA, SVP</u>	<u>3/8/2011</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.