

1.) CORPORATION NAME:

**ORR PROTECTION SYSTEMS, INC.**

DUE DATE: **12/30/2010**

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**

SCC ID NO: **F1061771**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**KY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11601 INTERCHANGE DR

CITY/ST/ZIP: LOUISVILLE, KY 40229-

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: RAYMOND ALDRIDGE  
TITLE: PRESIDENT  
ADDRESS: 11601 INTERCHANGE DR  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40229-

OFFICER

DIRECTOR

NAME: CLARK ORR, JR.  
TITLE: VICE PRESIDENT  
ADDRESS: 11601 INTERCHANGE DR  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40229-

OFFICER

DIRECTOR

NAME: CLARK ORR  
TITLE: CHMN OF BD  
ADDRESS: 11601 INTERCHANGE DR  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40229-

OFFICER

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/ RAYMOND ALDRIDGE  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

RAYMOND ALDRIDGE,  
PRESIDENT  
PRINTED NAME AND CORPORATE  
TITLE

12/29/2010

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.