

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213506103

1.) CORPORATION NAME:

SINGLE SOURCE TRANSPORTATION CO.

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1099391**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OK

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 855

CITY/ST/ZIP: DES MOINES, IA 50306

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 type="checkbox"/> DIRECTOR
NAME:	STEVEN G CHAPMAN		
TITLE:	PRESIDENT		
ADDRESS:	PO BOX 855		
CITY/ST/ZIP/CO:	DES MOINES, IA 50306		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOHN RUAN IV		
TITLE:	SECRETARY		
ADDRESS:	P.O. BOX 855		
CITY/ST/ZIP/CO:	DES MOINES, IA 50306		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TRACEY BALL		
TITLE:	TREASURER		
ADDRESS:	P.O. BOX 855		
CITY/ST/ZIP/CO:	DES MOINES, IA 50306		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN RUAN, III		
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 855		
CITY/ST/ZIP/CO:	DES MOINES, IA 50306		

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/ TRACEY BALL	TRACEY BALL, TREASURER	2/5/2013
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.