

| | | | | | | |
|--|---|--|-------|------------|--------|-----|
| SCC eFile | 2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 213501347 | | | | |
| 1.) CORPORATION NAME: Alliance Project Services, Inc. | | DUE DATE: 2/28/2013 | | | | |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TOD E NICKLES 19440 GOLF VISTA PLAZA STE 360 LEESBURG, VA 20176 | | SCC ID NO: F1737610 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY | | 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 100 |
| CLASS | AUTHORIZED | | | | | |
| COMMON | 100 | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | | | | | | |
| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 19440 GOLF VISTA PLAZA STE 360 CITY/ST/ZIP: LEESBURG, VA 20176 | | | | | | |
| 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: TOD E NICKLES | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR | | | | |
| TITLE: PRESIDENT | | | | | | |
| ADDRESS: 24117 Grand Ellison Ct | | | | | | |
| CITY/ST/ZIP/CO: ALDIE, VA 20105 | | | | | | |
| NAME: DIDIER E REED | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | | | | |
| TITLE: VP & TREASUER | | | | | | |
| ADDRESS: 10 RUE DE LA MAIRIE | | | | | | |
| CITY/ST/ZIP/CO: ST. GERMAIN SUR ECOLE, FRANCE 77930 FRANCE | | | | | | |
| NAME: EDWARD J HAYWARD | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | | | | |
| TITLE: SECRETARY | | | | | | |
| ADDRESS: 45 SOUTH 7TH STREET SUITE 3300 | | | | | | |
| CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55402 | | | | | | |
| 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/ TOD E NICKLES | TOD E NICKLES, PRESIDENT | 1/10/2013 | | | | |
| 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. | | | | | | |