

1.) CORPORATION NAME:

**Shaw Nuclear Services, Inc.**

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1752213**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**LA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4171 ESSEN LN  
Attn: Donna J. Cooper

CITY/ST/ZIP: BATON ROUGE, LA 70809

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:	DAVE P BARRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	4171 ESSEN LANE		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME:	MARK MCKAIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4171 ESSEN LANE (VP/Sec.)		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME:	RICHARD W SHIMOTA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	4171 ESSEN LANE (TREASURER/SR. VP)		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME:	REGINA N HAMILTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	4171 ESSEN LANE		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME:	ELI SMITH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4171 ESSEN LN (DIR./EVP)		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME:	CLARENCE L. RAY, JR.	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4171 ESSEN LANE (DIRECTOR/EVP)		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70809		

NAME: DAVID L BULLINGTON TITLE: VICE PRESIDENT ADDRESS: 4171 ESSEN LANE (ASST. VP, TAXATION) CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DAVID G KINNISON TITLE: ASST TREASURER ADDRESS: 4171 ESSEN LANE CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: E. KENNETH JENKINS TITLE: ASST SECRETARY ADDRESS: 4171 ESSEN LANE (VP/ASST. SEC.) CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: SHARON TANSKI TITLE: ASST SECRETARY ADDRESS: 4171 ESSEN LANE CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: EDWARD J HUBNER TITLE: VICE PRESIDENT ADDRESS: 4171 ESSEN LANE (SR. VP) CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: WILLIAM GRIFFITH TITLE: VICE PRESIDENT ADDRESS: 4171 ESSEN LANE (SR. VP) CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ALAN BECKMAN TITLE: VICE PRESIDENT ADDRESS: 4171 ESSEN LANE CITY/ST/ZIP/CO: BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> OFFICER <input 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/ REGINA N HAMILTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	REGINA N HAMILTON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	5/23/2012 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.		