

1.) CORPORATION NAME: VALLEY SERVICES, INC.	DUE DATE: 6/30/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEMS 4701 COX RD GLEN ALLEN, VA	SCC ID NO: F1755778
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: MS	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 4400 MANGUM DR CITY/ST/ZIP: FLOWOOD, MS 39232	
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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: JAMES WALT TITLE: PRESIDENT ADDRESS: PO BOX 5454 CITY/ST/ZIP/CO: JACKSON, MS 39288	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: HUGH TOTMAN TITLE: TREASURER ADDRESS: 2201 WATER RIDGE PARKWAY SUITE 320 CITY/ST/ZIP/CO: CHARLOTTE, NC 28217	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: MICHAEL BAILEY TITLE: CHAIRMAN ADDRESS: 2201 WATER RIDGE PARKWAY SUITE320 CITY/ST/ZIP/CO: CHARLOTTE, NC 28217	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: Michael Usher TITLE: SECRETARY ADDRESS: P.O. Box 5454 CITY/ST/ZIP/CO: Jackson, MS 39288	<input checked="" type="checkbox"/>	OFFICER	<input 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.

/s/ JAMES WALT	JAMES WALT, PRESIDENT	6/4/2013
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.