

1.) CORPORATION NAME:

NEEDLE'S EYE MINISTRIES, INC.

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JUDSON E CHILDRESS JR
104 BERRINGTON CT
RICHMOND, VA 23221**

SCC ID NO: **01739689**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 104 BERRINGTON COURT

CITY/ST/ZIP: RICHMOND, VA 23221

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:	JUDSON E CHILDRESS JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	104 BERRINGTON CT		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		
NAME:	JENNIFER R PARHAM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	8917 BRAWNER DRIVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	FRANKLI N Y GOARE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	12517 HIDDEN OAKS CT		
CITY/ST/ZIP/CO:	RICHMOND, VA 23233		
NAME:	CHARLES HOWE RICE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3832 NIGHTMUSE WAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23059		
NAME:	C. THOMAS EBEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8110 SAWMILL ROAD		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	DANIEL K. FRYER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	31 TWIN LAKE LANE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		

NAME: NYELETI S. HUDSON TITLE: DIRECTOR ADDRESS: 4414 AUGUSTA AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23230	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID H. MATHEWS TITLE: DIRECTOR ADDRESS: 8909 BRIERYLE ROAD CITY/ST/ZIP/CO: RICHMOND, VA 23229	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PATRIICA L. RICE TITLE: DIRECTOR ADDRESS: 403 HICKORY DRIVE CITY/ST/ZIP/CO: MANAKIN-SABOT, VA 23103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STEVEN A. ROGERS TITLE: DIRECTOR ADDRESS: 3713 SOVEREIGN LANE CITY/ST/ZIP/CO: RICHMOND, VA 23233	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DOUGLAS P. RUCKER TITLE: CHAIRMAN ADDRESS: 2308 EAST BROAD STREET CITY/ST/ZIP/CO: R, VA 23223	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: HAIDER SHARIFI TITLE: DIRECTOR ADDRESS: 1405 MANDERS KNOLL COURT CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23114	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CATHERINE R. STEMPLER TITLE: DIRECTOR ADDRESS: 4009 ASPEN VIEW COURT CITY/ST/ZIP/CO: RICHMOND, VA 23228	<input type="checkbox"/> OFFICER	<input checked="" 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/ JUDSON E CHILDRESS JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JUDSON E CHILDRESS JR, PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/23/2013 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.		