

1.) CORPORATION NAME:

RELIGION NEWSWRITERS ASSOCIATION

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JEFFERY L SHELER
408 WASHINGTON STREET
PORTSMOUTH, VA 23704**

SCC ID NO: **02825966**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

PORTSMOUTH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 408 WASHINGTON STREET

CITY/ST/ZIP: PORTSMOUTH, VA 23704

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:	ANN RODGERS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	34 BLVD OF THE ALLIES		
CITY/ST/ZIP/CO:	PITTSBURGH, PA 15222		
NAME:	ABE LEVY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	SAN ANTONIO EXPRESS-NEWS		
CITY/ST/ZIP/CO:	301 AVE E SAN ANTONIO, TX 78205		
NAME:	BOB SMETANA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 BROADWAY		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37203		
NAME:	ANSLEY ROAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	300 W. 110TH ST.		
CITY/ST/ZIP/CO:	APT. 15K NEW YORK, NY 10026		
NAME:	JAWEED KALEEM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	770 BROADWAY		
CITY/ST/ZIP/CO:	NEW YORK, NY 10003		
NAME:	MANYA BRACHEAR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	435 N. MICHIGAN AVE.		
CITY/ST/ZIP/CO:	CHICAGO, IL 60611		

NAME: JEFFREY DIAMANT TITLE: DIRECTOR ADDRESS: 215 ADAMS ST. CITY/ST/ZIP/CO: BROOKLYN, NY 11201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: STEVE MAYNARD TITLE: DIRECTOR ADDRESS: P.O.BOX 11000 CITY/ST/ZIP/CO: TACOMA, WA 98411	<input type="checkbox"/> OFFICER	<input checked="" 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/ ANN RODGERS	ANN RODGERS, PRESIDENT	2/9/2013
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.