

1.) CORPORATION NAME:

DUE DATE: **2/28/2014**

RELIGION NEWSWRITERS ASSOCIATION

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **02825966**

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

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:	ABE LEVY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	SAN ANTONIO EXPRESS-NEWS 301 AVE E SAN ANTONIO, TX 78205		
CITY/ST/ZIP/CO:			
NAME:	BOB SMIETANA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1100 BROADWAY NASHVILLE, TN 37203		
CITY/ST/ZIP/CO:			
NAME:	JAWEED KALEEM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	770 BROADWAY NEW YORK, NY 10003		
CITY/ST/ZIP/CO:			
NAME:	ANSLEY ROAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	300 W. 110TH ST. APT. 15K NEW YORK, NY 10026		
CITY/ST/ZIP/CO:			
NAME:	MANYA BRACHEAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	435 N. MICHIGAN AVE. CHICAGO, IL 60611		
CITY/ST/ZIP/CO:			
NAME:	JEFFREY DIAMANT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	215 ADAMS ST. BROOKLYN, NY 11201		
CITY/ST/ZIP/CO:			

NAME: Kay Campbell TITLE: DIRECTOR ADDRESS: 2317 Memorial Parkway SE CITY/ST/ZIP/CO: Huntsville, AL 35801	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Peter Smith TITLE: DIRECTOR ADDRESS: 1814 Edgeland Ave CITY/ST/ZIP/CO: Louisville, KY 40204	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Amy White TITLE: DIRECTOR ADDRESS: 11 E. Packer Ave. CITY/ST/ZIP/CO: Bethlehem, PA 18015	<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/ BOB SMIETANA SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BOB SMIETANA, PRESIDENT PRINTED NAME AND CORPORATE TITLE	12/27/2013 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.		