

1.) CORPORATION NAME: TRI-CITIES INTER-TRIBAL ASSOCIATION, INC.	DUE DATE: 6/30/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: IRIS A SMITH 3008 GRANBY ST HOPEWELL, VA 23860	SCC ID NO: 04681698
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HOPEWELL CITY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 3008 GRANBY STREET CITY/ST/ZIP: HOPEWELL, VA 23860	
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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: IRIS A SMITH TITLE: PRESIDENT ADDRESS: 3008 GRANBY STREET CITY/ST/ZIP/CO: HOPEWELL, VA 23860	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: MARY BALDUCCI MIDDLETON TITLE: VICE PRESIDENT ADDRESS: 905 COLONIAL AVENUE CITY/ST/ZIP/CO: COLONIAL HEIGHTS, VA 23834	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JESSI LEE KRENSON SMITH TITLE: SECRETARY ADDRESS: 2956 BOSTON STREET CITY/ST/ZIP/CO: HOPEWELL, VA 23860	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: IRIS A SMITH TITLE: TREASURER ADDRESS: 3008 GRANBY STREET CITY/ST/ZIP/CO: HOPEWELL, VA 23860	<input checked="" 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/ IRIS A SMITH	IRIS A SMITH, PRESIDENT	5/29/2012
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.