

1.) CORPORATION NAME:

**Professionals Reaching Out to the Community
(PROC)Foundation, Inc.**

DUE DATE: **2/28/2011**

SCC ID NO: **04796512**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
JOHN C IVINS JR
2100 EAST CARY STREET
RICHMOND, VA 23223**

5.) STOCK INFORMATION

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

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 6322

CITY/ST/ZIP: RICHMOND, VA 23230-0322

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:	ROSLYN RIKARD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4936 11TH STREET NE		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20017-		
NAME:	VALERIE BERRY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3110 WHITEHOUSE ROAD		
CITY/ST/ZIP/CO:	COLONIAL HEIGHTS, VA 23834-		
NAME:	LINDA WADE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12397 GLEN CARRIE ROAD		
CITY/ST/ZIP/CO:	ASHLAND, VA 23005-		
NAME:	CAROLYN WALKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1475 BROWNLEAF DRIVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225-		
NAME:	LISA WINN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2424 PROVIDENCE CREEK		
CITY/ST/ZIP/CO:	RICHMOND, VA 23236-		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARMAYNE B. VINCENT VICE CHAIRMAN 5212 VINTNER DRIVE #205 RICHMOND, VA 23234-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AN'JOU C. JOHNSON TREASURER PO BOX 2111 GLEN ALLEN, VA 23058-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOPE M. VAUGHAN CHAIRMAN 3831 WATERWHEEL DR MIDLOTHIAN, VA 23112-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARA J. D. HARRIS DIRECTOR 251 ROCKETTS WAY #208 RICHMOND, VA 23231-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA B. LANCASTER DIRECTOR 8407 MARWOOD DRIVE RICHMOND, VA 23235-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICOLE LITTLEJOHN FINANCIAL SECRE 3819 SHERWOOD FOREST TERRACE RICHMOND, VA 23237-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MONYETTE MARTIN DIRECTOR 11166 STERLING COVE DRIVE CHESTERFIELD, VA 23238-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANET MCCATTY DIRECTOR 2605 LAMPWORTH ROAD RICHMOND, VA 23231-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY MOORE DIRECTOR 14002 TRAILTOP TERRACE COLONIAL HEIGHTS, VA 23834-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIELLE REED DIRECTOR 9165 CHATHAM GROVE LANE RICHMOND, VA 23236-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ERNESTINE SCOTT, ED.D DIRECTOR 12214 SYLVAN RIDGE PLACE CHESTERFIELD, VA 23838-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARLENE SIMS DIRECTOR 5111 MONZA COURT RICHMOND, VA 23234-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRENDA J. FOSTER DIRECTOR 106 N. MOORELAND ROAD RICHMOND, VA 23229-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHERYL N. IVEY DIRECTOR 608 WILMER AVE RICHMOND, VA 23227-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOMMYE R. FINLEY, ED.D DIRECTOR 5901 HARBOUR WOOD PLACE MIDLOTHIAN, VA 23112-	<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/ HOPE M. VAUGHAN	HOPE M. VAUGHAN, CHAIRMAN	2/23/2011
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.