

1.) CORPORATION NAME:

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

Restoring America's Families Ministries, Inc.

SCC ID NO: **05169735**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 2489

CITY/ST/ZIP: PETERSBURG, VA 23804-

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: QUEEN BRANCH
TITLE: OFFICER/DIR
ADDRESS: PO BOX 2489
CITY/ST/ZIP/CO: PETERSBURG, VA 23804-

OFFICER

DIRECTOR

NAME: SONYA BROWN
TITLE: OFFICER
ADDRESS: P O BOX 2489
CITY/ST/ZIP/CO: PETERSBURG, VA 23804-

OFFICER

DIRECTOR

NAME: KERVIN BELL SR
TITLE: DIRECTOR
ADDRESS: PO BOX 2489
CITY/ST/ZIP/CO: PETERSBURG, VA 23804-

OFFICER

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/ SONYA BROWN

SONYA BROWN, OFFICER

2/28/2011

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.