

1.) CORPORATION NAME:

**VALLEY HOPE COUNSELING CENTER, INC.**

DUE DATE: **8/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY**

**FRANCESCA FEDE GOMEZ**

**109 SOUTH WAYNE AVENUE SUITE 200**

**PO DRAWER 1558**

SCC ID NO: **05253737**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

**WAYNESBORO, VA 22980**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**WAYNESBORO CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 20 STONERIDGE DRIVE  
SUITE 202

CITY/ST/ZIP: WAYNESBORO, VA 22980-

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.

OFFICER

DIRECTOR

NAME: JACK MCCLENAHAN  
TITLE: TREASURER  
ADDRESS: 221 ARROWROOT DR  
CITY/ST/ZIP/CO: LYNDHURST, VA 22952-

OFFICER

DIRECTOR

NAME: WALKER NORFORD  
TITLE: DIRECTOR  
ADDRESS: 1206 SUNSET LANE  
CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-

OFFICER

DIRECTOR

NAME: PAULA FIGGATT  
TITLE: DIRECTOR  
ADDRESS: 52 KOLB CIRCLE  
CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-

OFFICER

DIRECTOR

NAME: DINAH GOTTSCHALK  
TITLE: SECRETARY  
ADDRESS: 1325 CHATHAM RD  
CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-

OFFICER

DIRECTOR

NAME: KELLY HYSON  
TITLE: PRESIDENT  
ADDRESS: 209 MEADOW BEAUTY CT.  
CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-

NAME: LINDA MCKIBBIN TITLE: DIRECTOR ADDRESS: 376 MAPLE AVE CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	----------------------------------	--

NAME: CLAIRE COMAR TITLE: DIRECTOR ADDRESS: 101 POLAND ST. CITY/ST/ZIP/CO: WAYNESBORO, VA 22980-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
---	----------------------------------	--

NAME: THERESA QUILLEN TITLE: DIRECTOR ADDRESS: PO BOX 280 CITY/ST/ZIP/CO: LYNDHURST, VA 22952-	<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/ PAULA FIGGATT	PAULA FIGGATT, DIRECTOR	6/27/2011
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.