

1.) CORPORATION NAME:

LEAST OF THESE MINISTRIES

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
RICHARD L GRIER
100 SHOCKOE SLIP
RICHMOND, VA 23219**

DUE DATE: **3/31/2012**

SCC ID NO: **05554662**

5.) STOCK INFORMATION

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| 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: 100 SHOCKOE SLIP

CITY/ST/ZIP: RICHMOND, VA 23219-

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: MYRNA COHN MCLAUGHLIN
TITLE: P/T
ADDRESS: 20421 VENUS CIRCLE
CITY/ST/ZIP/CO: HUNTINGTON BEACH, CA 92646-

OFFICER

DIRECTOR

NAME: RICHARD L GRIER
TITLE: VP/S
ADDRESS: 100 SHOCKOE SLIP
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: DANIEL MARC JANNUZZI MD
TITLE: DIRECTOR
ADDRESS: 1727 CLOISTER DRIVE
CITY/ST/ZIP/CO: RICHMOND, VA 23229-

OFFICER

DIRECTOR

NAME: JOSEPH LACEY SJ
TITLE: DIRECTOR
ADDRESS: ST ALPHONSUS CHURCH
OLD COURT ROAD
CITY/ST/ZIP/CO: WOODSTOCK, MD 21163-

OFFICER

DIRECTOR

NAME: CULLIN B RIVERS MD
TITLE: DIRECTOR
ADDRESS: 11 ROSLYN HILLS DR
CITY/ST/ZIP/CO: RICHMOND, VA 23229-

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.

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|---|-----------------------------------|------------------|
| <u>/s/ MYRNA COHN MCLAUGHLIN</u> | <u>MYRNA COHN MCLAUGHLIN, P/T</u> | <u>2/10/2012</u> |
| 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.