

1.) CORPORATION NAME: **TERESA R. SUTHERLIN MINISTRIES, INC.** DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **SHERRY SUTHERLIN** SCC ID NO: **05928189**

**331 DRAGONVILLE RD
KING AND QUEEN CH, VA 23085**

5.) STOCK INFORMATION
CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
KING & QUEEN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 331 DRAGONVILLE RD
CITY/ST/ZIP: KING & QUEEN, VA 23085

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TERESA R SUTHERLIN	
TITLE:	PRESIDENT	
ADDRESS:	331 DRAGONVILLE RD	
CITY/ST/ZIP/CO:	KING & QUEEN, VA 23085	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SHERRY SUTHERLIN	
TITLE:	VICE PRESIDENT	
ADDRESS:	331 DRAGONVILLE ROAD	
CITY/ST/ZIP/CO:	KING & QUEEN C.H., VA 23085	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SHARON YOUNG	
TITLE:	TREASURER	
ADDRESS:	P O BOX 404	
CITY/ST/ZIP/CO:	SALUDA, VA 23149	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TAWANNA CAMPBELL	
TITLE:	SECRETARY	
ADDRESS:	PO BOX 404	
CITY/ST/ZIP/CO:	11821 TIDEWATER TRAIL SALUDA, VA 23149	

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/ TERESA R SUTHERLIN	TERESA R SUTHERLIN,	4/19/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT	DATE
	PRINTED NAME AND CORPORATE TITLE	

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.