

1.) CORPORATION NAME:

**Step Up To Success, Inc.**

DUE DATE: **6/30/2011**

SCC ID NO: **05976253**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
ELLEN D SMITH  
112 PEACH GROVE LN  
MONTROSS, VA 22520**

5.) STOCK INFORMATION

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

**WESTMORELAND COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 112 PEACH GROVE LN  
STE A

CITY/ST/ZIP: MONTROSS, VA 22520-

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: MRS LINDA TAYLOR  
TITLE: DIRECTOR  
ADDRESS: 750 RICH NECK ROAD  
CITY/ST/ZIP/CO: WARSAW, VA 22572-

OFFICER  DIRECTOR

NAME: MS MABEL C JONES  
TITLE: DIRECTOR  
ADDRESS: 503 STONEY RD  
CITY/ST/ZIP/CO: HEATHSVILLE, VA 22473-

OFFICER  DIRECTOR

NAME: ANTONETTE ARTZ  
TITLE: CHAIRMAN  
ADDRESS: P.O. BOX  
CITY/ST/ZIP/CO: WALDORF, MD 20603-

OFFICER  DIRECTOR

NAME: TAMARA SMITH  
TITLE: VICE CHAIRMAN  
ADDRESS: 504 MONROE POINT DR.  
CITY/ST/ZIP/CO: COLONIAL BEACH, VA 22443-

OFFICER  DIRECTOR

NAME: LAURA C JACKSON  
TITLE: SECRETARY  
ADDRESS: 13303HILLROD LANE  
CITY/ST/ZIP/CO: UPPER MARLBORO, MD 20774-

OFFICER  DIRECTOR

NAME: BEVERLEY M. DIXON TITLE: ASST SECRETARY ADDRESS: 1737 ALBERT DR. CITY/ST/ZIP/CO: BOWIE, MD 20721-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: SYLVESTER FLEMING TITLE: TREASURER ADDRESS: 3611 MT. HOLLY-HUNTERVILLE ROAD #218 CITY/ST/ZIP/CO: CHARLOTTE, NC 28216-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MS STEPHANIE FINKLIN TITLE: DIRECTOR ADDRESS: 714 VAULT FIELD ROAD CITY/ST/ZIP/CO: KINSALE, VA 22488-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BRENT A. JACKSON TITLE: DIRECTOR ADDRESS: 406 WEST FRANKLIN ST. CITY/ST/ZIP/CO: RICHMOND, VA 23220-	<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.		
<u>/s/ TAMARA SMITH</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>TAMARA SMITH, VICE CHAIRMAN</u> PRINTED NAME AND CORPORATE TITLE	<u>6/16/2011</u> 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.		