

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213532616

1.) CORPORATION NAME:

**The Giving Heart**

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**VICKI L NEILSON  
11527 PRIMROSE LN  
ROCKVILLE, VA**

SCC ID NO: **06003545**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HANOVER COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11527 PRIMROSE LN

CITY/ST/ZIP: ROCKVILLE, VA 23146

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:	JOY ELLIOTT				
TITLE:	VICE PRESIDENT				
ADDRESS:	16476 LOCUS HILL DRIVE				
CITY/ST/ZIP/CO:	ROCKVILLE, VA 23146				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	VICKI L NEILSON				
TITLE:	PRES/EXEC DIR				
ADDRESS:	11527 PRIMROSE LN				
CITY/ST/ZIP/CO:	ROCKVILLE, VA 23146				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	Donya Phillippe Carter				
TITLE:	SECRETARY				
ADDRESS:	3244 Lowry Road				
CITY/ST/ZIP/CO:	Columbia, VA 23038				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	Stan Wright				
TITLE:	TREASURER				
ADDRESS:	9359 Colvincrest Drive				
CITY/ST/ZIP/CO:	Mechanicsville, VA 23116				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	Kara Lancaster-Gay				
TITLE:	DIRECTOR				
ADDRESS:	5000 Barkbridge Circle				
CITY/ST/ZIP/CO:	Chesterfield, VA 23832				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	Felicia Mason				
TITLE:	DIRECTOR				
ADDRESS:	9001 Patterson Ave., Apt. 135				
CITY/ST/ZIP/CO:	Henrico, VA 23229				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Norman Mason DIRECTOR 9001 Patterson Ave., Apt. 135 Henrico, VA 23229	<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/ VICKI L NEILSON	VICKI L NEILSON, PRES/EXEC DIR	7/13/2013	
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.			