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| 1.) CORPORATION NAME: Woodbine Family Worship Center and ChristianSchool, Inc. | DUE DATE: 11/30/2015 |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: GENE R WELLS 12914 CANOVA DRIVE MANASSAS, VA | SCC ID NO: 06061279 |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: PRINCE WILLIAM COUNTY | 5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/> |
| 4.) STATE OR COUNTRY OF INCORPORATION: VA | |

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| 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 12914 CANOVA DR CITY/ST/ZIP: MANASSAS, VA 20112 | |
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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.

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| NAME: GENE WELLS TITLE: PRESIDENT ADDRESS: 12914 CANOVA DR CITY/ST/ZIP/CO: MANASSAS, VA 20112 | <input checked="" type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: SAMUEL OSEI TITLE: DIRECTOR ADDRESS: 12914 CANOVA DR CITY/ST/ZIP/CO: MANASSAS, VA 20112 | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: DANIEL THOMAS TITLE: DIRECTOR ADDRESS: 12914 CANOVA DRIVE CITY/ST/ZIP/CO: MANASSAS, VA 20112 | <input type="checkbox"/> | OFFICER | <input checked="" type="checkbox"/> | DIRECTOR |
| NAME: DANA WELLS TITLE: DIRECTOR ADDRESS: 12914 CANOVA DR CITY/ST/ZIP/CO: MANASSAS, VA 20112 | <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.

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| /s/ GENE WELLS | GENE WELLS, PRESIDENT | 1/7/2016 |
| 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.