

1.) CORPORATION NAME: Transfiguration Christian Fellowship Ministries,INC.	DUE DATE: 7/31/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ANTHONY D JONES 42007 VILLAGE STATION SQ ALDIE, VA 20105	SCC ID NO: 06210041
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: LOUDOUN COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 44610 WAXPOOL RD CITY/ST/ZIP: ASHBURN, VA 20147	
--	--

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: ANTHONY D JONES	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: 42007 VILLAGE STATION SQUARE				
CITY/ST/ZIP/CO: ALDIE, VA 20105				

NAME: CRISHAON C JONES	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: CO BISHOP				
ADDRESS: 42007 VILLAGE STATION SQUARE				
CITY/ST/ZIP/CO: ALDIE, VA 20105				

NAME: RALPH B TANKSLEY	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: OFFICER				
ADDRESS: 25134 PENNY WORK TERR				
CITY/ST/ZIP/CO: ALDIE, VA 20105				

NAME: MONIQUE Y TANKSLEY	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
TITLE: CO DIR				
ADDRESS: 25134 PENNY WORT TERR				
CITY/ST/ZIP/CO: ALDIE, VA 20105				

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/ ANTHONY D JONES	ANTHONY D JONES, DIRECTOR	9/20/2012
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.