

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212552821

1.) CORPORATION NAME:

Secure Organization Building EducationalRecovery, Inc.

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MICHAEL WADE EDWARDS
1646 PIPERS GAP RD
GALAX, VA 24333**

SCC ID NO: **06283808**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CARROLL COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1646 PIPERS GAP ROAD

CITY/ST/ZIP: GALAX, VA 24333

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:	Ted Snow				
TITLE:	PRESIDENT				
ADDRESS:	37 Pottery DR				
CITY/ST/ZIP/CO:	Fance Gap, VA 24328				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	KAREN L EDWARDS				
TITLE:	VICE PRESIDENT				
ADDRESS:	1646 PIPERS GAP RD				
CITY/ST/ZIP/CO:	GALAX, VA 24333				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	SEBRENA F SAVAGE				
TITLE:	DIRECTOR				
ADDRESS:	412 BUCK TRAIL				
CITY/ST/ZIP/CO:	WOODLAWN, VA 24381				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	Debby Edwards				
TITLE:	PRESIDENT				
ADDRESS:	Po Box 433				
CITY/ST/ZIP/CO:	Indepence, VA 24348				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	Michael W Edwards				
TITLE:	DIRECTOR				
ADDRESS:	1646 Pipers Gap Rd				
CITY/ST/ZIP/CO:	Galax, VA 24333				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	Dee Amsler				
TITLE:	SECRETARY				
ADDRESS:	Po Box 349				
CITY/ST/ZIP/CO:	Woodlown, VA 24381				

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/ Ted Snow	Ted Snow, PRESIDENT	1/15/2013
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.		