

1.) CORPORATION NAME:

AFS of Bastian, Inc.

DUE DATE: **1/31/2012**

SCC ID NO: **06306963**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

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

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5228 VALLEY POINT PARKWAY
BLD B STE 1

CITY/ST/ZIP: ROANOKE, VA 24019-

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:	THOMAS M CLARKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5228 VALLEY POINT PKWY BLDG B STE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

NAME:	ROBERT BELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	5828 VALLEYPOINTE PKWY BLDG B, SUITE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

NAME:	SAM RASOUL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	5228 VALLEYPOINTE PKWY BLDG B, SUITE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

NAME:	ANA CLARKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIR		
ADDRESS:	5228 VALLEY POINT PKWY BLDG B SUITE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

NAME:	REV DAVID ERICKSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3483 LIBERTY		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21224-		

NAME: WAYNE FUQUAY TITLE: DIRECTOR ADDRESS: 5828 VALLEYPONTE PKWY BLDG B, SUITE 1 CITY/ST/ZIP/CO: ROANOKE, VA 24019-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: LYNN HODGE TITLE: CHAIRMAN ADDRESS: 1001 GENTER UNIT B CITY/ST/ZIP/CO: LA JOLLA, CA 92037-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ SAM RASOUL</u>	<u>SAM RASOUL, TREASURER</u>	<u>1/9/2012</u>
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.