

1.) CORPORATION NAME: Capital Worship Center	DUE DATE: 4/30/2012
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VICTOR F RINALDI 10521 JUDICIAL DR #204 FAIRFAX, VA 22030	SCC ID NO: 06361364
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX CITY (FILED IN FAIRFAX COUNTY)	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: VICTOR RINALDI
10521 Judicial Dr. #204

CITY/ST/ZIP: FAIRFAX, VA 22030

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: JONATHAN M KELLEY	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: PRESIDENT				
ADDRESS: PO BOX 1976				
CITY/ST/ZIP/CO: CENTREVILLE, VA 20122				

NAME: CHARLA KELLEY	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: VICE PRESIDENT				
ADDRESS: PO BOX 1976				
CITY/ST/ZIP/CO: CENTREVILLE, VA 20122				

NAME: IKECHUKU CHIGEWEE	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: SECRETARY TREAS				
ADDRESS: PO BOX 1976				
CITY/ST/ZIP/CO: CENTREVILLE, VA 20122				

NAME: VERL DYER	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
TITLE: DIRECTOR				
ADDRESS: PO BOX 1976				
CITY/ST/ZIP/CO: CENTREVILLE, VA 20122				

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/ JONATHAN M KELLEY	JONATHAN M KELLEY, PRESIDENT	4/10/2012
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.