

1.) CORPORATION NAME: Pamela Westbrook Ministries	DUE DATE: 3/31/2014
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: PAMELA WESTBROOK 1800 HICKS RD NORTH CHESTERFIELD, VA	SCC ID NO: 06732259
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CHESTERFIELD COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1800 HICKS RD CITY/ST/ZIP: NORTH CHESTERFIELD, VA 23235	
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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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PAMELA WESTBROOK		
TITLE: DIRECTOR		
ADDRESS: 1800 HICKS RD		
CITY/ST/ZIP/CO: NORTH CHESTERFIELD, VA 23235		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ASHLEY BAKER		
TITLE: DIRECTOR		
ADDRESS: 1918 WARRIOR TRAIL		
CITY/ST/ZIP/CO: NORTH CHESTERFIELD, VA 23236		

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/ PAMELA WESTBROOK	PAMELA WESTBROOK, DIRECTOR	3/29/2014
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.