

1.) CORPORATION NAME:

**Spirit of Fire Fellowship, Incorporated**

DUE DATE: **5/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RAQUEL ARIANNA MAYE  
4601 VALLEY CREST DRIVE  
#201**

SCC ID NO: **06779029**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

**MIDLOTHIAN, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESTERFIELD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1210 WESTOVER HILLS BOULEVARD

CITY/ST/ZIP: RICHMOND, VA 23225

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:	MICHAEL MAYE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	4601 VALLEY CREST DRIVE		
	#201		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23112		

NAME:	RAQUEL MAYE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CAO/DIR		
ADDRESS:	4601 VALLEY CREST DRIVE		
	#201		
CITY/ST/ZIP/CO:	MIDLOTHIAN, VA 23112		

NAME:	LUCILLE BUCKINGHAM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2633 CARLETON GOLD RD		
CITY/ST/ZIP/CO:	DACULA, GA 30019		

NAME:	MAURICE DAVIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. BOX 592		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23111		

NAME:	TORY MAYE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	111 E 15TH ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23224		

NAME:	ERNEST QUICK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	125 ROSEMOORE DRIVE		
CITY/ST/ZIP/CO:	COVINGTON, GA 30014		

NAME: STACEY WATSON TITLE: DIRECTOR ADDRESS: 8609 EASTWOOD COURT CITY/ST/ZIP/CO: NORTH CHESTERFIELD, VA 23236	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	----------------------------------	--

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/ RAQUEL MAYE	RAQUEL MAYE, CAO/DIR	6/2/2015
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.