

1.) CORPORATION NAME: God of Wonder Ministries International	DUE DATE: 7/31/2015
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JOYCE MCCONNELL 115 MANOR CT APT 304 WARRENTON, VA	SCC ID NO: 06806228
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAUQUIER COUNTY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 115 Manor Ct. Apt #304 CITY/ST/ZIP: Warrenton, VA 20186	
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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.

NAME: LARRY MCCONNELL TITLE: PRESIDENT ADDRESS: 12214 BRISTOW RD CITY/ST/ZIP/CO: BRISTOW, VA 20136	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: REBEKAH MCCONNELL TITLE: SEC/TREAS ADDRESS: 12214 BRISTOW RD CITY/ST/ZIP/CO: BRISTOW, VA 20136	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOHN C SHAFFER TITLE: TREASURER ADDRESS: 7611 DOWNSTREAM CT CITY/ST/ZIP/CO: FREDERICKSBURG, VA 22408	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOYCE MCCONNELL TITLE: SECRETARY ADDRESS: 115 MANOR CTR APT #304 CITY/ST/ZIP/CO: WARRENTON, VA 20186	<input checked="" type="checkbox"/>	OFFICER	<input 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/ LARRY MCCONNELL	LARRY MCCONNELL, PRESIDENT	10/29/2015
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.