

1.) CORPORATION NAME: Positive Peer Pressure Community Program 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: KENNYON L HARRIS 304 YORK ST SUFFOLK, VA	DUE DATE: 3/31/2013 SCC ID NO: 06914105 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: SUFFOLK CITY			
4.) STATE OR COUNTRY OF INCORPORATION: VA			

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 304 YORK ST CITY/ST/ZIP: SUFFOLK, VA 23434

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: KENNYON L HARRIS TITLE: PRESIDENT ADDRESS: 304 YORK ST CITY/ST/ZIP/CO: SUFFOLK, VA 23434	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Geral De Staten TITLE: VICE PRESIDENT ADDRESS: 426 Wilson St CITY/ST/ZIP/CO: Suffolk, VA 32434	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Carl Johnson TITLE: DIRECTOR ADDRESS: 1316 Poplar Hall Dr CITY/ST/ZIP/CO: Norfolk, VA 23502	<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/ KENNYON L HARRIS	KENNYON L HARRIS, PRESIDENT	3/25/2013
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.