

1.) CORPORATION NAME:

The Center for Hope and Healing

DUE DATE: **3/31/2011**

SCC ID NO: **06918494**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

VB BUSINESS SERVICES LLC

500 WORLD TRADE CENTER

NORFOLK, VA 23510

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

NORFOLK CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 11478

CITY/ST/ZIP: NORFOLK, VA 23517-

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: KARI RAYESS
TITLE: D/S
ADDRESS: 4810 BRADSHAW ROAD
CITY/ST/ZIP/CO: GUM SPRING, VA 23065-

OFFICER

DIRECTOR

NAME: DEBORAH STITZER BRAME
TITLE: DIRECTOR
ADDRESS: 516 LONDON STREET
CITY/ST/ZIP/CO: PORTSMOUTH, VA 23704-

OFFICER

DIRECTOR

NAME: CHUCK ENGLE
TITLE: DIRECTOR
ADDRESS: 4931 PLEASANT AVE.
CITY/ST/ZIP/CO: NORFOLK, VA 23518-

OFFICER

DIRECTOR

NAME: ANDREW D BAILLIE
TITLE: TREASURER
ADDRESS: 1214 PROGRESSIVE DRIVE
SUITE 200
CITY/ST/ZIP/CO: CHESAPEAKE, VA 23320-

OFFICER

DIRECTOR

NAME: ELIZABETH COOK
TITLE: DIRECTOR
ADDRESS: 7666 MAURY AVE
CITY/ST/ZIP/CO: NORFOLK, VA 23505-

OFFICER

DIRECTOR

OFFICER DIRECTOR

NAME: KRISTJANA SMITH
TITLE: D/PRESIDENT
ADDRESS: 1172 HARBOR RIVER DR
CITY/ST/ZIP/CO: MEMPHIS, TN 38103-

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.

<u>/s/ KRISTJANA SMITH</u>	<u>KRISTJANA SMITH, D/PRESIDENT</u>	<u>2/20/2011</u>
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.