

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213513683

1.) CORPORATION NAME:

**First Assembly of God of Gate City, Virginia, Inc.**

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CYNTHIA P WILLIAMS  
320 HILLCREST DR  
GATE CITY, VA 24251**

SCC ID NO: **06927669**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**SCOTT COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 184 FIR ST

CITY/ST/ZIP: GATE CITY, VA 24251

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:	PAUL D ARGOE				
TITLE:	PRESIDENT				
ADDRESS:	197 FIR ST				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	THOMAS R GILLIAM				
TITLE:	VICE PRESIDENT				
ADDRESS:	1547 WADLOW GAP HWY				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	CYNTHIA P WILLIAMS				
TITLE:	SECRETARY				
ADDRESS:	320 HILLCREST ST				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	SCARLET CROSSNOE				
TITLE:	TREASURER				
ADDRESS:	1029 West Jackson Street				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	TIMOTHY A SPICER				
TITLE:	DIRECTOR				
ADDRESS:	136 GEORGE SPICER AVENUE				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

		<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JIMMY STURGILL				
TITLE:	DIRECTOR				
ADDRESS:	262 SALISBURY LANE				
CITY/ST/ZIP/CO:	GATE CITY, VA 24251				

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/ CYNTHIA P WILLIAMS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>CYNTHIA P WILLIAMS, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>3/19/2013</u> DATE
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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.