

1.) CORPORATION NAME:

**VISIONS OF TRUTH COMMUNITY DEVELOPMENT
CORPORATION**

DUE DATE: **5/31/2013**

SCC ID NO: **06943401**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATHAN CHAPMAN
5910 W NORFOLK RD
PORTSMOUTH, VA**

5.) STOCK INFORMATION

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

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

PORTSMOUTH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5910 WEST NORFOLK ROAD

CITY/ST/ZIP: PORTSMOUTH, VA 23703

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: CALVIN BULLOCK TITLE: VICE PRESIDENT ADDRESS: 5910 W NORFOLK RD CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-3327	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: DARYL POTTS TITLE: TRES ADDRESS: 5910 W NORFOLK RD CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-3327	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JOHNETTA VAUGHN TITLE: SECRETARY ADDRESS: 5910 W NORFOLK RD CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-3327	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: VALENCIA BALLARD TITLE: DIRECTOR ADDRESS: 5910 WEST NORFOLK CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARGARET E DEPENA TITLE: DIRECTOR ADDRESS: 5910 WEST NORFOLK ROAD CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SHOWANDA MAYER TITLE: DIRECTOR ADDRESS: 5910 WEST NORFOLK ROAD CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: DAVID WILLIAMS OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 5910 WEST NORFOLK ROAD
CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703

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/ MARGARET E DEPENA</u>	<u>MARGARET E DEPENA,</u>	<u>6/17/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DIRECTOR 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.