

1.) CORPORATION NAME: **Mount Zinia Holiness Church** DUE DATE: **10/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **KENNETH S WALKER SR** SCC ID NO: **07016231**

**1023 WILCOX AVE
PORTSMOUTH, VA**

5.) STOCK INFORMATION

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

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1023 WILCOX AVENUE

CITY/ST/ZIP: PORTSMOUTH, VA 23704-7036

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:	KENNETH S WALKER SR	
TITLE:	PASTOR/PRES	
ADDRESS:	3311 DARTMOUTH AVENUE	
CITY/ST/ZIP/CO:	PORTSMOUTH, VA 23707	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LEONARD MURRAY	
TITLE:	ASSOC PASTOR	
ADDRESS:	808 MIDDLE STREET	
CITY/ST/ZIP/CO:	SMITHFIELD, VA 23430-1017	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RUTH MURRAY	
TITLE:	SECRETARY	
ADDRESS:	208 MIDDLE STREET	
CITY/ST/ZIP/CO:	SMITHFIELD, VA 23430-1017	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KENNETH S WALKER	
TITLE:	DIRECTOR	
ADDRESS:	3311 DARTMOUTH STREET	
CITY/ST/ZIP/CO:	PORTSMOUTH, VA 23707	

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/ KENNETH S WALKER SR	KENNETH S WALKER SR,	11/25/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PASTOR/PRES 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.