

1.) CORPORATION NAME:

Angel Airlines for PTSD Recovery

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JAMES SMITH
4620 HAYGOOD RD STE 1
VIRGINIA BEACH, VA 23455**

SCC ID NO: **07110513**

5.) STOCK INFORMATION

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

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4620 HAYGOOD RD STE 1

CITY/ST/ZIP: VIRGINIA BEACH, VA 23455

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:	CHARLES SCHWENDER	
TITLE:	PRESIDENT	
ADDRESS:	713 RIVER STRAND	
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23320	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	C. LEE DAVIS	
TITLE:	SECRETARY	
ADDRESS:	905 FULTON CT	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23454	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOANIE CORKRUM	
TITLE:	ASST SECRETARY	
ADDRESS:	1109 EWELL ROAD	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23455	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHIP HILBORN	
TITLE:	TREASURER	
ADDRESS:	4838 CANDOR DR	
CITY/ST/ZIP/CO:	CHESAPEAKE, VA 23321	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LINDA H JOHNSON	
TITLE:	ASST TREASURER	
ADDRESS:	3313 WEEPING WILLOW LN.	
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23453	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DR. HARRY BEAVER	
TITLE:	VICE CHRMN	
ADDRESS:	6324 CULVERHOUSE CT	
CITY/ST/ZIP/CO:	GAINESVILLE, VA 20155	

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/ JOANIE CORKRUM	JOANIE CORKRUM, ASST	4/23/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY 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.