

1.) CORPORATION NAME: Anchor of Hope Worship Center	DUE DATE: 1/31/2015
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MICHAEL JEROME REYNOLDS SR 2413 MEADOWBROOK RD ROANOKE, VA	SCC ID NO: 07181100
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ROANOKE CITY	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1608-A PETERS CREEK ROAD NW

CITY/ST/ZIP: ROANOKE, VA 24017

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 type="checkbox"/> DIRECTOR
NAME: TRACY NIBBLETT		
TITLE: ASST TREASURER		
ADDRESS: 1511 ORANGE AVENUE NW		
CITY/ST/ZIP/CO: ROANOKE, VA 24017		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: HANNAH BURWELL		
TITLE: SECRETARY		
ADDRESS: 4037 WYOMING AVENUE		
CITY/ST/ZIP/CO: ROANOKE, VA 24017		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CAROLYN HAIRSTON REYNOLDS		
TITLE: DIRECTOR		
ADDRESS: 2413 MEADOWBROOK ROAD		
CITY/ST/ZIP/CO: ROANOKE, VA 24017		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL JEROME REYNOLDS, SR		
TITLE: DIRECTOR		
ADDRESS: 2413 MEADOWBROOK ROAD		
CITY/ST/ZIP/CO: ROANOKE, VA 24017		

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/ CAROLYN HAIRSTON REYNOLDS	CAROLYN HAIRSTON REYNOLDS, DIRECTOR	2/20/2015
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.